| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | <u></u> |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | f . | |
|--|-------------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name | <u>Charlene</u> First name | First name |
| Write the name that is on your government-issued picture identification (for example, your driver's | Middle name Hall | Middle name |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the | First name | First name |
| last 8 years | | |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your | XXX - XX- 7191 | xxx - xx- |
| digits of your Social Security | OR | OR |
| number or federal Individual Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |
| ` , | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 2 of 82

| De | ebtor 1 Charlene First Name | Hall | Case number (if known) |
|---|---|--|--|
| | First Name | Middle Name Last Name | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | ✓ I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the | | Business name | Business name |
| | last 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 8208 S. Paulina Number Street | Number Street |
| | | Chicago Illinois 60620 | |
| | | City State Zip Code | City State Zip Code |
| | | Cook County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you a this mailing address. | If Debtor 2's mailing address is different from yours, fill it |
| | | Number Street | Number Street |
| | | | |
| | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this | Check one: | Check one: |
| | district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408. |) I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | _ |
| | | | _ |
| | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 3 of 82

| Debtor 1 Charlene First Name | | dall ast Name | Case number (if known |) |
|---|---|--|---|--|
| Part 2: Tell the Court Ab | out Your Bankruptcy Case | | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description of e B2010)). Also, go to the top of page 1 a Chapter 7 Chapter 11 Chapter 12 Chapter 13 | • | | o) for Individuals Filing for Bankruptcy (Form |
| 8. How you will pay the fee | court for more details about may pay with cash, cashier on your behalf, your attorned I need to pay the fee in in Individuals to Pay Your Filing I request that my fee be we By law, a judge may, but is less than 150% of the offici | t how you may pay. To be check, or money of the check, or money of the check of the | ypically, if you a rder If your at dit card or check cose this option Official Form 10 est this option of e your fee, and if oplies to your far on, you must fill o | nly if you are filing for Chapter 7. may do so only if your income is mily size and you are unable to pay ut the Application to Have the |
| 9. Have you filed for bankruptcy within the last 8 years? | No. Yes. District District District | t of Illinois When When When | MM / DD / YYYY MM / DD / YYYY | Case number 1:09-bk-38168 Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | V No. Yes. Debtor District Debtor District | When When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. Go to line 12. ✓ Yes. Has your landlord obtained a ✓ No. Go to line 12. ✓ Yes. Fill out <i>Initial State</i> this bankruptcy pe | ement About an Eviction Jud | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 4 of 82

| Debtor 1 Charlene | | N.C. I | | Hall | Case number (if known) | | |
|---|--------|-------------|--|--|--|-------------------|--|
| First Name | | | | Last Name | | | |
| Part 3: Report About | Any Bu | sinesse | es You Own as a S | ole Proprietor | | | |
| 12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | No. | Go to Part 4. Name and location of b Name of business, if an Number City | ousiness ny Street | state | Zip Code | |
| If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | 1 | | Single Asset Re Stockbroker (as | siness (as defined in eal Estate (as defined defined in 11 U.S.C. ker (as defined in 11 U | 11 U.S.C. § 101(27A)) I in 11 U.S.C. § 101(51B)) § 101(53A)) | | |
| 13. Are you filing under Chapter 11, the court must know whether you are a small business debtor so that it can set approduced deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the product operations of small business debtor? For a definition of small business debtor, see 11 U.S.C. § 11 16(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. § 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | | ent of | | |
| | | | | | - | tcy Code. | |
| Part 4: Report if You | Own or | Have A | Any Hazardous Pro | operty or Any P | roperty That Needs Im | mediate Attention | |
| 14. Do you own or ha any property that poses or is allege to pose a threat of imminent and identifiable hazard | d □ | No. Yes. | What is the hazard? | | | | |
| to public health of safety? Or do you own any property that needs immediate attention? | | , | Where is the property? | Number | Street | | |
| For example, do you own perishable good or livestock that mube fed, or a building that needs urgent repairs? | ds, | | | City | State | Zip Code | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 5 of 82

Debtor 1 Charlene Hall Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 6 of 82

| Debtor 1 Charlene | | Hall Case number (if kn | own) | | | | |
|---|---|---|---|--|--|--|--|
| Part 6: Answer These Qu | Middle Name Luestions for Reporting Purpos | ast Name | | | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | mate that | | | | | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 | | | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | | |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | | |
| Part 7: Sign Below For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** /s/ Charlene Hall Signature of Debtor 1 Executed on | | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 7 of 82

| Debtor 1 | Charlene | | Hall | Case number | (if known) |
|--|--|--|--|---|--|
| | First Name | Middle Name | Last Name | | |
| you are by one If you a represe | ur attorney, if e represented are not ented by an ey, you do not | eligibility to proceed un the relief available und to the debtor(s) the not certify that I have no ke petition is incorrect. | der Chapter 7, 11, 12, er each chapter for whice required by 11 U.S. | or 13 of title 11, Uich the person is o C. § 342(b) and, i | that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the |
| | o file this page. | /s/ Chris Pryor Signature of Attorney f | or Debtor | Date | 11/10/2016 MM / DD / YYYY |
| | | Chris Pryor Printed name Semrad Law Firm Firm name 11101 S. Western Aver | iue | | |
| | | Chicago | I | Ilinois | 60643 |
| | | City | | State | Zip Code |
| | | Contact phone | | Email address | cpryor@semradlaw.com |
| | | | | Illino | ois |
| | | Bar number | | Stat | te |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 8 of 82

| Fill in this information to identify your case: | | | | | | |
|---|--------------------------|-------------|----------------------|--|--|--|
| Debtor 1 | Charlene | | Hall | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing | First Name | Middle Name | Last Name | | | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois | | | |
| Case number (If known) | | | (State) | | | |

| П | Check if this is ar |
|---|---------------------|
| | amended filing |

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$19,681.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$19,681.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$38,559.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$105.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$22,802.17 |
| Your total liabilities | \$61,466.17 |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,591.64 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J | \$1,891.00 |
| | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 9 of 82

| De | btor 1 Charlene | | Hall | Case number (if known) | | | | | |
|-------------|---|-------------------------------|---|--|------------|--|--|--|--|
| | First Name | Middle Name | Last Name | | | | | | |
| Par | t 4: Answer These Ques | stions for Administra | ative and Statistical Re | cords | | | | | |
| 6. / | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | |
| | = | ort on this part of the form. | Check this box and submit this | form to the court with your other schedule | S. | | | | |
| | ✓ Yes. | | | | | | | | |
| 7. \ | What kind of debt do you hav | re? | | | | | | | |
| | | | ner debts are those incurred by out lines 8-10 for statistical purp | an individual primarily for a personal, poses. 28 U.S.C. § 159. | | | | | |
| | Your debts are not prima this form to the court with your | - | have nothing to report on this p | part of the form. Check this box and submi | t | | | | |
| 8. | From the Statement of Your Form 122A-1 Line 11; OR, Form | • | | hly income from Official | \$2,732.12 | | | | |
| 9. | Copy the following special | categories of claims from | n Part 4, line 6 of Schedule E | /F: | | | | | |
| | From Part 4 on Schedule E | F, copy the following: | | Total claim | | | | | |
| | 9a. Domestic support obligation | ons (Copy line 6a.) | | \$0.00 | | | | | |
| | 9b. Taxes and certain other de | bts you owe the governmen | at. (Copy line 6b.) | \$105.00 | | | | | |
| | 9c. Claims for death or person | al injury while you were into | oxicated. (Copy line 6c.) | \$0.00 | | | | | |
| | 9d. Student loans. (Copy line 6 | | | | | | | | |
| | 9e. Obligations arising out of a | | | | | | | | |
| | priority claims. (Copy line 6g. |) | | #0.00 | | | | | |
| | 9f. Debts to pension or profit-s | sharing plans, and other sin | nilar debts. (Copy line 6h.) | \$0.00 | | | | | |
| | 9g. Total. Add lines 9a throug | ıh 9f. | | \$105.00 | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 10 of 82

| Debtor 1 | (| Charlene | ~ | | Hall | | | |
|---------------------------------------|-----------------------------------|---|--|-------------------------------|---|---------------------|---|---|
| | _ | irst Name | Middle N | Name | Last Name | | | |
| Debtor 2 (Spouse. | if filing) <u> </u> | First Name | Middle N | Name | Last Name | | | |
| | | | | Name | | | | |
| United St | ates Ban | kruptcy Court for the: | Northern | | District of Illinois (State) | | | |
| Case nun (If known) | nber _ | | | | | | | |
| Officia | al Fo | rm 106A/B | | | | | | Check if this is an amended filing |
| Sche | dule | A/B: Prope | erty | | | | | 12/1 |
| category v responsib write your | where you ble for su name a | ou think it fits best. B upplying correct info nd case number (if k | se as complete and rmation. If more s nown). Answer ev | id accu space i very qu | set only once. If an asset fits in more or rate as possible. If two married peoples needed, attach a separate sheet to estion. , or Other Real Estate You Ow | e are f this fo | iling together, both are arm. On the top of any a | equally |
| 1. Do you | | r have any legal or ed to Part 2 | quitable interest ir | n any r | esidence, building, land, or similar pro | operty [*] | ? | |
| | | here is the property? | | | | | | |
| 1.1 | | address, if available, or | r other description | | t is the property? Check all that apply. ingle-family home ruplex or multi-unit building condominium or cooperative lanufactured or mobile home | | | laims or exemptions. Put ad claims on Schedule D: nims Secured by Property. Current value of the portion you own? |
| | Numbe | | 7in Codo | | and vestment property imeshare ther | | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | City | State | Zip Code | Who one. | has an interest in the property? Che lebtor 1 only lebtor 2 only lebtor 1 and Debtor 2 only t least one of the debtors and another | ck | Check if this is con (see instructions) | mmunity property |
| | | | | | r information you wish to add about | this ite | m, such as local | |
| lf vou | own or h | ave more than one, list | here: | prop | erty identification number: | | | |
| 1.2 | | address, if available, or | | | t is the property? Check all that apply. ingle-family home uplex or multi-unit building condominium or cooperative lanufactured or mobile home | | Do not deduct secured c the amount of any secure Creditors Who Have Cla Current value of the entire property? | laims or exemptions. Put ded claims on Schedule D: hims Secured by Property. Current value of the portion you own? |
| | | | | | and | | | |
| | Numbe | r Street State | Zip Code | ĦŢ | vestment property imeshare ther | | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | Oily | Ciaio | 2.p 0000 | Who one. | has an interest in the property? Che | ck | Check if this is co (see instructions) | mmunity property |
| | | | | | ebtor 1 only | | Ц | |
| | | | | | ebtor 2 only | | | |
| | | | | | ebtor 1 and Debtor 2 only | | | |
| | | | | _ | t least one of the debtors and another | | | |
| | | | | | r information you wish to add about | inis ite | m, such as local | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 11 of 82

| Debtor 1 | Charlene First Name | Middle Name | Hall C | ase number | (if known) | |
|-----------------------------|---|---|--|-------------|---|---|
| 1.3 | et address, if available, or ot | | What is the property? Check all that apply Single-family home Duplex or multi-unit building | l. | | d claims on Schedule D: ims Secured by Property. |
| Nun | nber Street | | Condominium or cooperative Manufactured or mobile home Land | | Current value of the entire property? | Current value of the portion you own? |
| City | State | Zip Code | Investment property Timeshare Other | | Describe the nature of interest (such as fee sit the entireties, or a life of the entireties). | mple, tenancy by |
| | | M [[[| Who has an interest in the property? Ch Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | eck one. | Check if this is cor (see instructions) | nmunity property |
| | - | pı tion you own for al | ther information you wish to add abour roperty identification number: Il of your entries from Part 1, including | any entries | for pages | |
| Do you o vyou own th | at someone else drives. If youns, trucks, tractors, sport util | equitable interest ir u lease a vehicle, also | n any vehicles, whether they are registe o report it on Schedule G: Executory Contra cles | | | |
| 3.1 | Model: Year: | GMC Arcadia 2009 100000 | Who has an interest in the property one. Debtor 1 only | ? Check | Do not deduct secured of the amount of any secure Creditors Who Have Cla | • |
| | Approximate mileage: Other information: Debtor to pay direct to finance | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this is community proper | | Current value of the entire property? \$7775.00 | Current value of the portion you own? \$7775.00 |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | Nissan Altima 2015 27000 | instructions) Who has an interest in the property one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? | |
| | | | At least one of the debtors and anoth Check if this is community proper instructions) | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 12 of 82

| Same Model: Who has an interest in the property? Check Current value of the entire property? Current value of the en | Debtor 1 | | Hall Case number | r (if known) | |
|--|----------|----------------------|--|-----------------------|---------------------------------------|
| Model: | | First Name Middle N | Name Last Name | | |
| Year: Approximate mileage: Debtor 1 and Debtor 2 only Current value of the entire property? Current value of the militre property? Check one. 3.4 Make Model: Debtor 1 and Debtor 2 only Debtor 1 only Approximate mileage: Debtor 1 and Debtor 2 only Debtor 1 only Approximate mileage: Debtor 1 only At least one of the debtors and another Check if this is community property? Check one. 4 Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples. Boals, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories Who has an interest in the property? Check one. Who has an interest in the property? Check one. Who has an interest in the property? Check one. Other information: Debtor 1 only Current value of the entire property? Who has an interest in the property? Check one. Other information: Debtor 1 only Check if this is community property (see instructions) Who has an interest in the property? Check one. Other information: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Approximate mileage: Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debto | 3.3 | | | | • |
| Approximate mileage: | | | | • | |
| Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Make Model: Year: Approximate mileage: Other information: Who has an interest in the property? Check one. Debtor 1 and Debtor 2 only Other information: Who has an interest in the property? Check one. Creditors Witho Have Claims or exemptions. Put the amount of any secured claims on exemptions. Put the amount of any secured claims on exemptions. Put the amount of any secured claims on exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the militer property? Who has an interest in the property (see instructions) Who has an interest in the property? Check one. Who has an interest in the property? Check one. Who has an interest in the property? Check one. Other information: Who has an interest in the property? Check one. Other information: Who has an interest in the property? Check one. Other information: Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured clai | | | | Creditors vvno Have (| Jaims Secured by Property. |
| At least one of the debtors and another check if this is community property (see instructions) 3.4 Make | | Approximate mileage. | _ Debtor 2 only | Current value of the | Current value of the |
| Check if this is community property (see instructions) 3.4 Make Who has an interest in the property? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Current value of the entire property? Do not deduct secured claims or exemptions. Put the amount of any secured claims | | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| instructions) Who has an interest in the property? Check one. Year: Debtor 1 only Debtor 2 only Current value of the entire property? Check if this is community property Carrent value of the entire property? Carrent value of the ent | | | At least one of the debtors and another | | |
| Make Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of a | | | Check if this is community property (see | | |
| Model: Year: Debtor 1 only Current value of the entire property? Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No | | | instructions) | | |
| Debtor 1 only Current value of the entire property? Current value of the entire property? Current value of the portion you own? | 3.4 | Make | Who has an interest in the property? Check | | |
| Approximate mileage: Other information: Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes 4.1 Make Model: Year: Approximate mileage: Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Current value of the entire property? Current value of the entire property? Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions. Put | | Model: | one. | | |
| Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Ves 4.1 Make Model: Year: Approximate mileage: Other information: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Check if this is community property (see instructions) Approximate mileage: Debtor 1 only Debtor 2 only Current value of the entire property? Approximate mileage: Debtor 2 only Current value of the entire property? Creditors Who Have Claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Approximate mileage: Debtor 1 only Debtor 1 only Creditors Who Have Claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? | | | Debtor 1 only | Creditors Who Have (| Claims Secured by Property. |
| At least one of the debtors and another Check if this is community property (see instructions) | | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the |
| Check if this is community property (see instructions) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No | | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes 4.1 Make Model: Year: Approximate mileage: Other information: Who has an interest in the property? Check one. Debtor 1 and Debtor 2 only Current value of the entire property? At least one of the debtors and another Check if this is community property (see instructions) At least one of the debtors and another Debtor 1 only Check if this is community property (see instructions) At least one of the debtors and another Check if this is community property (see instructions) At least one of the debtors and another Check if this is community property (see instructions) At least one of the debtors and another Check if this is community property (see instructions) At least one of the debtors and another Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages | | | At least one of the debtors and another | | |
| Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No | | | Check if this is community property (see | | |
| Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No | | | instructions) | | |
| Year: Approximate mileage: Other information: Debtor 1 and Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Year: Approximate mileage: Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Current value of the entire property? Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the entire property? Current value of the entire property? Current value of the entire property? Current value of the entire property? Current value of the entire property? Current value of the entire property? Current value of the entire property? Secured by Property. Current value of the entire property? Current value of the entire property? Secured by Property. Current value of the entire property? Current value of the entire property? Secured by Property. Current value of the entire property? Current value of the entire property? Secured by Property. Current value of the entire property? Current value of the entire property? Current value of the entire property? | 4.1 | Make | | | • • • • • • • • • • • • • • • • • • • |
| Approximate mileage: Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Year: Approximate mileage: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own? Current value of the entire property? Current value of the entire property. States one of the debtors and another instructions. Current value of the entire property. Current value of the entire property. Current value of the entire property. | | | | | |
| Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Year: Approximate mileage: Other information: Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Current value of the entire property? Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Stack if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages | | | — <u> </u> | Creditors who have t | Бантіз Зесигей by Fторену. |
| At least one of the debtors and another Check if this is community property (see instructions) 4.2 Make Model: Year: Approximate mileage: Other information: Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property? Check one. Creditors Who Have Claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Stacks 600 | | | = ' | | |
| Check if this is community property (see instructions) 4.2 Make Model: Year: Approximate mileage: Other information: Check if this is community property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the entire property? Current value of the portion you own? Stage75.00 | | Other information: | | entire property? | portion you own? |
| instructions) 4.2 Make | | | | | |
| Model: Year: Approximate mileage: Other information: Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Destror 2 only At least one of the debtors and another Check if this is community property (see instructions) The amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own? Check if this is community property (see instructions) Stage 75 00 | | | | | |
| Year: Approximate mileage: Debtor 2 only Other information: Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the entire property? Current value of the portion you own? Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages | 4.2 | Make | Who has an interest in the property? Check | Do not deduct secured | I claims or exemptions. Put |
| Approximate mileage: Debtor 2 only Current value of the entire property? At least one of the debtors and another Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages Stage 75.00 | | Model: | one. | · · | |
| Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Check if the debtors and any entries for pages States one of the debtors and any entries for pages States one of the debtors and any entries for pages States one of the debtors and any entries for pages | | | Debtor 1 only | Creditors Who Have 0 | Claims Secured by Property. |
| Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$\frac{18675.00}{2}\$ | | Approximate mileage: | _ Debtor 2 only | Current value of the | Current value of the |
| Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages | | Other information: | Debtor 1 and Debtor 2 only | | |
| instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$\sigma_{18675.00}\$ | | | At least one of the debtors and another | | |
| | | | | | |
| | | | | | 18675.00 |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 13 of 82

| Debtor 1 | | A #1.1.II | | Hall | Case number (if known) | |
|-------------------|----------------------------------|---|---------------------------|--|-------------------------|--|
| Dowt Or | First Name | | | Last Name | | |
| Part 3: | | our Personal and | | n any of the followi | ng items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. Hous | sehold goods | and furnishings | | | | |
| Examp | oles: Major app | bliances, furniture, linens, | china, kitchenware | | | |
| ☐ No | | | | | | |
| Yes. I | Describe | Goods and furniture | | | | \$350.00 |
| | | | | | | \$550.00 |
| 7. Elect Examp | | s and radios; audio, video | o, stereo, and digital eq | uipment; computers, printe | rs, scanners; music | |
| = | Describe | Used electronics | | | | 1 . |
| 163.1 | Describe | Osed electronics | | | | \$150.00 |
| Examp | • | and figurines; paintings, p | · | books, pictures, or other and s, memorabilia, collectibles | • |] |
| _ | | | | | | |
| | oles: Sports, ph | orts and hobbies notographic, exercise, and ks; carpentry tools; musica | | nt; bicycles, pool tables, gol | f clubs, skis; canoes | |
| ✓ No | | | | | | |
| Yes. I | Describe | | | | | |
| ✓ No | | les, shotguns, ammunitio | n, and related equipme | nt | |] |
| — ' | | clothes, furs, leather coat | s, designer wear, shoe | s, accessories | | 1 |
| ∐ No | | | | | | 7 |
| ✓ Yes. I | Describe | Used clothing | | | | \$500.00 |
| 12. Jew Examp | • | | engagement rings, wed | lding rings, heirloom jewelr | ry, watches, gems, | |
| Yes. | Describe | | | | | <u> </u> |
| | n-farm animal oles: Dogs, cat | ls s, birds, horses | | | | |
| Yes. I | Describe | | | | | |
| | / other persor | nal and household item | s you did not already | list, including any health | n aids you did not list | |
| ✓ No | D"- | | | | | 7 |
| ∐ Yes. I | Describe | | | | | |
| | | | | ng any entries for pages | | \$1000.00 |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 14 of 82

| Deb | tor 1 | Charlene | | Hall | Case number (if known) | |
|------|---------------------|--------------------------------------|---|-----------------------------|---|--|
| | | First Name | Middle Name | Last Name | | |
| Part | 4: | Describe Your F | inancial Assets | | | |
| Do | you | own or have a | ny legal or equitable int | erest in any of the f | following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Cash | | | | | |
| E | Exam ✓ | ples: Money you have No | e in your wallet, in your home, in a | safe deposit box, and on ha | and when you file your petition | |
| | | Yes | | | Cash: | |
| 17. | Exa | | vings, or other financial accounts titutions. If you have multiple acco | | ares in credit unions, brokerage houses, ion, list each. | |
| | ✓ | No Yes | | Institution name: | | |
| | | | 17.1. Checking account: | ВМО | | \$6.00 |
| | | | 17.2. Checking account: | | | |
| | | | 17.3. Savings account: | | | |
| | | | 17.4. Savings account: | | | |
| | | | 17.5. Certificates of deposit: | | | |
| | | | 17.6. Other financial account: | | | |
| | | | 17.7. Other financial account: | | | |
| | | | 17.8. Other financial account: | | | |
| | | | 17.9. Other financial account: | | | |
| 18. | | | or publicly traded stocks ovestment accounts with brokerag | e firms, money market acco | ounts | |
| | ✓ | No | | ,, | | |
| | | Yes | Institution or issuer name: | | | |
| | | | | | | |
| | | | | | | |
| 19. | Nor | -publicly traded et | ack and interests in incorpora | ated and unincorporated | businesses, including an interest in | |
| 13. | an I | LC, partnership, a | | ned and difficorporated | businesses, including an interest in | |
| | ✓ | No | Name of entity | | % of ownership: | |
| | | Yes. Give specific information about | | | ,, o . o | |
| | | them | | | | |
| | | | | | | |
| | | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 15 of 82

| Debt | tor 1 | Charlene | | Hall | Case number (if known) | |
|------|----------|-------------------------|--------------------------------------|----------------------------------|---|---|
| | | First Name | Middle Name | Last Name | | |
| 20. | | | orate bonds and other negotia | | | |
| | | | nclude personal checks, cashiers' | | | |
| | | _ | nts are those you cannot transfer | to someone by signing or o | delivering them. | |
| | ⊻ | No | | | | |
| | | Yes. Give specific | | | | |
| | | information about | Issuer name: | | | |
| | | them | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | - |
| 21. | | tirement or pension | | \ thrift accines accounts a | r other pension or profit charing plans | |
| | | | (A, ERISA, Neogn, 401(K), 403(D) |), tririit savings accounts, o | r other pension or profit-sharing plans | |
| | | No | Type of account: | Institution name: | | |
| | Ш | Yes. List each account | 401(k) or similar plan: | | | |
| | | separately. | | | | |
| | | | Pension plan: | = | | |
| | | | IRA: | | | |
| | | | Retirement account: | | | |
| | | | Keogh: | | | |
| | | | Additional account: | | | |
| | | | Additional account: | | | |
| 22. | Sec | curity deposits and p | prepayments | | | |
| | You | r share of all unused o | deposits you have made so that yo | ou may continue service or ι | use from a company | |
| | | | with landlords, prepaid rent, public | c utilities (electric, gas, wat | er), telecommunications | |
| | | npanies, or others | | Lange Carana | | |
| | | No | | Institution name: | | |
| | Ш | Yes | Electric: | | | - |
| | | | Gas: | | | |
| | | | Heating oil: | | | |
| | | | Security deposit on rental unit: | | | |
| | | | Prepaid rent: | | | |
| | | | Telephone: | | | |
| | | | Water: | | | |
| | | | Rented furniture: | | | |
| | | | Other: | | | |
| 23. | Anı | nuities (A contract for | a periodic payment of money to y | you, either for life or for a nu | umber of years) | |
| | V | No | | | | |
| | П | Yes | Issuer name and description: | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 16 of 82

| Debt | or 1 Charlene First Name | | Middle Name | Hall Last Name | Case number (if known) | |
|------|---|--|------------------------|--|---|--|
| 24. | Interests in a | | account in a qual | | der a qualified state tuition program | |
| | ✓ No Yes | Institution name and de | scription. Separately | file the records of any interes | sts.11 U.S.C. § 521(c): | |
| | | | | | | |
| 25. | | able or future interests | s in property (other | r than anything listed in lin | e 1), and rights or powers | |
| | ✓ No | | | | | 7 |
| | Yes. Desc | eribe | | | | |
| 26. | | - | | ther intellectual property in royalties and licensing agree | ements | |
| | ✓ No Yes. Desc | ribe | | | | |
| 27 | Liconsos fra | nchises, and other ge | noral intangibles | | | |
| 27. | Examples: Buil | | | e association holdings, liquor | r licenses, professional licenses | |
| | ✓ No Yes. Desc | eribe | | | | |
| | | | | | | _ |
| | | | | | | |
| Mor | ney or prop€ | erty owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or prope | | | | | portion you own? |
| | | | | | | portion you own? Do not deduct secured |
| | Tax refunds on ✓ No ✓ Yes. Give s | wed to you specific information | | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds on No Yes. Give s about | wed to you specific information t them, including whethe | | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds on No Yes. Give s about you a and th | wed to you specific information t them, including whethe llready filed the returns he tax years | | | | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and ti Family suppor Examples: Past | wed to you specific information t them, including whethe llready filed the returns he tax years | ır | child support, maintenance, di | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past | wed to you specific information t them, including whethe liready filed the returns he tax years rt due or lump sum alimor | ır | child support, maintenance, di | State: Local: vorce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past | wed to you specific information t them, including whethe llready filed the returns he tax years | ır | child support, maintenance, di | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past | wed to you specific information t them, including whethe liready filed the returns he tax years rt due or lump sum alimor | ır | child support, maintenance, di | State: Local: vorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past | wed to you specific information t them, including whethe liready filed the returns he tax years rt due or lump sum alimor | ır | child support, maintenance, di | State: Local: vorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past | wed to you specific information t them, including whethe liready filed the returns he tax years rt due or lump sum alimor | ır | child support, maintenance, di | State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds on ✓ No Yes. Give s about you a and th Family suppor Examples: Past ✓ No Yes. Give s Other amount: Examples: Unpa | specific information t them, including whethe liready filed the returns he tax years rt due or lump sum alimor specific information | ny, spousal support, o | sability benefits, sick pay, vaca | State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds on ✓ No Yes. Give s about you a and th Family support Examples: Past ✓ No Yes. Give s Other amounts Examples: Unpp. Soci | specific information t them, including whethe liready filed the returns he tax years rt due or lump sum alimor specific information | ny, spousal support, o | sability benefits, sick pay, vaca | State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds on ✓ No Yes. Give s about you a and th Family suppor Examples: Past ✓ No Yes. Give s Other amount: Examples: Unpa | specific information t them, including whethe llready filed the returns he tax years It due or lump sum alimor specific information s someone owes you aid wages, disability insu ial Security benefits; unp | ny, spousal support, o | sability benefits, sick pay, vaca | State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 17 of 82

| Deb | tor 1 Charlene | Hall | Case number (if known) | |
|------|---|---------------------------------------|--|--|
| | First Name Middle Name | Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; he | alth savings account (HSA); credit, h | nomeowner's, or renter's insurance | |
| | ✓ No Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died. | | or are currently entitled to receive | |
| | ✓ No Yes. Describe | | | |
| 33. | Claims against third parties, whether or not y Examples: Accidents, employment disputes, insu | | demand for payment | |
| | ✓ No Yes. Describe | | | |
| 34. | Other contingent and unliquidated claims o to set off claims | f every nature, including counter | claims of the debtor and rights | |
| | ✓ No Yes. Describe | | | |
| 35. | Any financial assets you did not already list | | | |
| | ✓ No Yes. Describe | | | |
| 36. | Add the dollar value of all of your entries fro for Part 4. Write that number here | | | \$6.00 |
| | | | | |
| Part | | | an Interest In. List any real estate | in Part 1. |
| 37. | Do you own or have any legal or equitable in | terest in any business-related pro | | current value of the |
| | ✓ No. Go to Part 6. Yes. Go to line 38. | | p | ortion you own? In the control of th |
| 38. | Accounts receivable or commissions you alre | eady earned | | |
| | Yes. Describe | | | |
| 39. | Office equipment, furnishings, and supplies Examples: Business-related computers, software | | chines, rugs, telephones, desks, chairs, electro | nic devices |
| | ✓ No Yes. Describe | | | |
| | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 18 of 82

| Deb | tor 1 | Charlene | | Hall | | Case number (if known) | | |
|-------|--------------|---|---|----------------------------------|---------------------------|-------------------------|-----|---|
| 40. | Ma | First Name | Middle Name juipment, supplies you | Last N | | | | |
| 40. | | | juipment, supplies you | use in business, an | id tools of your trade | | | |
| | | No Yes. Describe | | | | | 1 | |
| | ш | res. Describe | | | | | | |
| | | | | | | | | |
| 41. | Inv | ventory | | | | | | |
| | \checkmark | No | | | | | 1 | |
| | Ш | Yes. Describe | | | | | | |
| | | L | | | | | | |
| 42. | | - | ips or joint ventures | | | | | |
| | ✓ | No | | Name of entity: | | % of ownership: | | |
| | | Yes. Give specific | | name or entity. | | % of ownership. | | |
| | | information about them | | - | | | _ | |
| | | | | | | | _ | |
| | | | | | | | _ | |
| 43. (| Cust | tomer lists, mailing | lists, or other compilat | ions | | | | |
| | ✓ | No | | | | | | |
| | | Yes. Do your lists in | clude personally identifial | ole information (as de | fined in 11 U.S.C. § 101(| 41A))? | | |
| | | □ No | | | | | | |
| | | Yes. Descr | ribe | | | | | |
| | • | | | | | | | |
| 44. | | | property you did not alre | eady list | | | | |
| | | No | | | | | | |
| | ш | Yes. Give specific information | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | Г | |
| | | | II of your entries from F | | | | | |
| | | _ | | | | | | |
| Part | t 6: | If you own or have ar | -arm- and Commer n interest in farmland, list it | ciai Fishing-Rei : in Part 1. | ated Property fou | Own or Have an Interest | in. | |
| 46. | Do | you own or have a | ny legal or equitable in | terest in any farm- o | or commercial fishing-re | elated property? | | |
| | ✓ | No. Go to Part 7. | | | | | | Current value of the |
| | Ë | Yes. Go to line 47. | | | | | | portion you own? Do not deduct secured |
| | | • | | | | | | claims |
| 47 | F - | rm onimala | | | | | | or exemptions |
| 4/. | | rm animals <i>ampl</i> es: Livestock, por | ultry, farm-raised fish | | | | | |
| | V | 1 | | | | | | |
| | Ť | Yes. Describe | | | | | 1 | |
| | | • | | | | | | |
| | | | | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 19 of 82

| Deb | tor 1 | Charlene | | Hall | Case number (if known) | |
|--------------|----------|--------------------------------|--|-------------------------|------------------------------|--------------|
| | _ | First Name | Middle Name | Last Name | | |
| 48. | Cro | ops-either growing o | or harvested | | | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| | | | | | | |
| 49. | Far | m and fishing equir | oment, implements, machinery, fixto | res, and tools of trade | | |
| 10. | | | , | | | |
| | ✓ | _ | | | i | |
| | Ш | Yes. Describe | | | | |
| | | | | | | |
| 50. | Far | m and fishing supp | ies, chemicals, and feed | | | |
| | ✓ | No | | | | |
| | П | Yes. Describe | | | | |
| | | | | | | |
| | | | | | | |
| 51. | An | y tarm- and commer | cial fishing-related property you did | i not aiready list | | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| | | | | | | |
| | | | | | Γ | |
| | | | of your entries from Part 6, includi | | | |
| 101 1 | ai t U | . Write that number | | | | |
| | | | | | | |
| | | I | | | | |
| Part | | | pperty You Own or Have an I | | Did Not List Above | |
| 53. | | | perty of any kind you did not already , country club membership | / list? | | |
| | ✓ | | , coantry cras members up | | | |
| | | No | | | | |
| | Ш | Yes. Give specific information | | | | |
| | | momation | | | | |
| | | | | | | |
| - 4 . | | | -form and a form Bart 7 Mails of | | _ | |
| 54. A | aa ti | ne dollar value of all | of your entries from Part 7. Write the | nat number nere | | |
| | | | | | | |
| | | • | | | | |
| Part | 8: | List the Totals of | of Each Part of this Form | | | |
| EE 1 | Oort : | 1. Total real actate I | ino 2 | | • | |
| 55. r | art | 1. Total real estate, i | ine 2 | | | |
| 56. t | oart 2 | 2 total vehicles, line | 5 | \$40075.00 | | |
| | | | | \$18675.00 | | |
| 5/. P | art 3 | 3: Total personal and | I household items, line 15 | \$1000.00 | | |
| 58. P | art 4 | l: Total financial ass | ets, line 36 | \$6.00 | | |
| 59. I | art : | 5: Total business-re | lated property, line 45 | | | |
| 60 I | Part (| 6: Total farm- and fi | shing-related property, line 52 | - | | |
| | | | | | | |
| 61. I | Part ' | 7: Total other prope | rty not listed, line 54 | | | |
| 62. | Γotal | personal property. | Add lines 56 through 61 | \$19681.00 | | + \$19681.00 |
| | | | | ψ10001.00 | Copy personal property total | . \$10001.00 |
| | | | | | | \$19681.00 |
| 63. T | otal | of all property on So | chedule A/B. Add line 55 + line 62 | | | ψ19001.00 |
| | | 1 1 2 2 | | | | i l |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 20 of 82

| Fill in this inform | Fill in this information to identify your case: | | | |
|---------------------------|---|-------------|------------------------------|---|
| Debtor 1 | Charlene | | Hall | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing | First Name | Middle Name | Last Name | - |
| United States B | ankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number (If known) | | | (State) | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | t1: Identify the Property You Cla | im as Exempt | | |
|-----|--|--------------------------------------|---|------------------------------------|
| 1. | Which set of exemptions are you claimi | ng? Check one only, e | ven if your spouse is filing with you. | |
| | You are claiming state and federal nonb | ankruptcy exemptions. | 11 U.S.C. § 522(b)(3) | |
| | You are claiming federal exemptions. 1 | 1 U.S.C. § 522(b)(2) | | |
| 2. | For any property you list on Schedule A | /B that you claim as e | xempt, fill in the information below. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | | |
| | Brief description: GMC Arcadia, 2009, Debtor to pay direct to finance company | \$7,775.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c) |
| | Line from Schedule A/B: 03 | | | |
| | Brief description: Nissan Altima, 2015 Line from Schedule A/B: 03 | \$10,900.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c) |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every) No Yes. Did you acquire the property covers No Yes | 3 years after that for ca | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 21 of 82

| otor 1 Charlene | | Hall Case number (if known) | |
|---|--|---|------------------------------------|
| First Name Middle 12: Additional Page | le Name L | Last Name | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
| Brief description: BMO Line from Schedule A/B: 17 | \$6.00 | \$6.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Goods and furniture Line from Schedule A/B: 06 | \$350.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Used clothing Line from Schedule A/B: 11 | \$500.00 | \$500.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) |
| Brief description: Used electronics Line from School to A/R: 07 | \$150.00 | \$150.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 22 of 82

| Fill in | this inform | ation to identify your case: | | | | | |
|------------------------|--|--|---|---------------------------|-------------------|--------------------------------------|--|
| Debtor 1 Charlene Hall | | | | | | | |
| Debli | JI 1 | First Name | Middle Name Last Name | | | | |
| Debte | | | | | | | |
| (Spot | use, if filing | First Name | Middle Name Last Name | | | | |
| Unite | d States Ba | ankruptcy Court for the: | Northern District of Illinois | | | | |
| Case | number | | (State) | | | | |
| (If kno | own) | | | | _ | | |
| Off | icial F | Form 106D | | | | Check if this is a amended filing | |
| Sc | hedu | le D: Credite | ors Who Have Claims Secur | ed by Pro | | 12/1 | |
| | | | e. If two married people are filing together, both are equal | | | | |
| space | is needed | I, copy the Additional Pa | ge, fill it out, number the entries, and attach it to this forn | | | | |
| | | er (if known). | | | | | |
| 1. | | editors have claims secur | | -l t- | | | |
| | | neck this box and submit the ill in all of the information b | is form to the court with your other schedules. You have nothing | else to report on this i | orm. | | |
| D1 | | | elow. | | | | |
| Part | | All Secured Claims | be a second the second | Cal man A | Caliman D | Oak was 0 | |
| 2. | | | has more than one secured claim, list the creditor separately ditor has a particular claim, list the other creditors in Part 2. As | Column A Amount of claim | Column B Value of | Column C Unsecured | |
| | | | alphabetical order according to the creditor's name. | Do not deduct the | collateral | portion | |
| | | | | value of collateral. | that supports | If any | |
| 0.4 | ALLV EIN | ANICIAI | | #44.004.00 | this claim | \$2.24C.00 | |
| 2.1 | ALLY FIN Creditor's | | Describe the property that secures the claim: | \$11,021.00 | \$7,775.00 | \$3,246.00 | |
| | | RENAISSANCE CTR Imber Street | O60 Automobile As of the date you file, the claim is: Check all that apply. | eck all that apply | | | |
| | - Number | | Contingent | | | | |
| | DETROIT Michigan 48243 | | Unliquidated | | | | |
| | City | State ZIP Code | Disputed | | | | |
| | | owes the debt? Check one. ebtor 1 only | Nature of lien. Check all that apply. | | | | |
| | Debto | or 2 only | An agreement you made (such as mortgage or secured car loan) | | | | |
| | | or 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | | |
| | At lea | least one of the debtors and other | Judgment lien from a lawsuit | | | | |
| | | k if this claim relates | Other (including a right to offset) | | | | |
| | Date deb | community debt t was <u>1/1/2016</u> | Last 4 digits of account number 7181 | | | | |
| 2.2 | | erican Finance | Describe the manufactuates assume the elemen | \$1,230.00 | \$350.00 | \$880.00 | |
| | Creditor's | Name | Describe the property that secures the claim: 012 InstallmentLoan | Ψ1,200.00 | φοσσ.σσ | φοσο.σσ | |
| | Numbe | er Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | | Contingent | | | | |
| | Chicago Illinois 60606 City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates | | Unliquidated | | | | |
| | | | Disputed | | | | |
| | | | Nature of lien. Check all that apply. | | | | |
| | | | An agreement you made (such as mortgage or secured car loan) | | | | |
| | | | Statutory lien (such as tax lien, mechanic's lien) | | | | |
| | | | Judgment lien from a lawsuit | | | | |
| | | | Other (including a right to offset) | | | | |
| | Date deb | community debt t was <u>6/1/2016</u> | Last 4 digits of account number 3172 | | | | |
| | incurred | Add the dollar value of v | Your entries in Column A on this page. Write that | \$12.251.00 | | | |
| | | add the dollar value of y number here: | our entries in Column A on this page. Write that | \$12,251.00 | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 23 of 82

| Debtor 1 C | harlene | Hall | Case nu | ımber (if known) | | |
|----------------------|---|--|---|---|--|-----------------------------------|
| Part:1 | Additional Page | Last Name his page, number them beginnin | g with 2.3, followed by | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| Frank City Who | State ZIP Code owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt debt was Il/1/2014 | Describe the property that section of the date you file, the clair Contingent Unliquidated Disputed Nature of lien. Check all that appure An agreement you made (succar loan) Statutory lien (such as tax lied) Judgment lien from a lawsuit Other (including a right to office. | n is: Check all that apply. Oly. ch as mortgage or secured n, mechanic's lien) set) | \$26,308.00 | \$10,900.00 | <u>\$15,408.00</u> |
| | here: | ur entries in Column A on this pour form, add the dollar value to | • | \$26,308.00 \$38,559.00 | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 24 of 82

| nation to identify your case | 9: | | | | |
|--|--|--|---|---|---|
| Charlene | | Hall | | | |
| First Name | Middle Name | Last Name | | | |
| a) First Name | Middle Name | Last Name | | | |
| | | | | | |
| Sankruptcy Court for the: | Northern | | | | |
| | | (0.0.0) | | | |
| | | | | | |
| orm 106E/F | | | l | Check if this is a | n amended tiling |
| ule E/F: Cre | ditors Who | Have Unsecured C | laims | | 12/1 |
| a Schedule G: Executory on Schedule D: Creditors oxes on the left. Attach All of Your PRIORIT reditors have priority unsecured of the priority unsecured of the priority what type of claim it is possible, list the claims in a sign Page of Part 1. If more | chaims. If a creditor has r If a claim has both priority lphabetical order according than one creditor holds a | ed Leases (Official Form 106G). Do not incured by Property. If more space is needed to this page. On the top of any additional page. you? Incore than one priority unsecured claim, list the rand nonpriority amounts, list that claim here a g to the creditor's name. If you have more that particular claim, list the other creditors in Particular claim, list the other claim, list the other claim, list the other claim claim claim claim claim. | e creditor separate and show both prior in two priority unse | rs with partially see bu need, fill it out, i name and case n ly for each claim. Fo ity and nonpriority a | cured claims number the umber (if |
| pianation of each type of t | aaim, see the instructions i | or this form in the instruction bookiet.) | | | Nonpriority amount |
| Department of Revenue Creditor's Name | La | st 4 digits of account number | \$10 | | |
| Street | - | nen was the debt incurred? of the date you file, the claim is: Check all Contingent | | 05.00 \$105.00 | \$0.00 |
| | Charlene First Name Sankruptcy Court for the: Sankruptcy Court for the: | Charlene First Name Middle Name Ankruptcy Court for the: Northern Middle Name Sankruptcy Court for the: Northern Middle Name Sankruptcy Court for the: Northern Middle Name Sankruptcy Court for the: Northern Northe | Charlene Hall First Name Middle Name Last Name Spirits Name Middle Name Last Name Stankruptcy Court for the: Northern District of Illinois (State) Orm 106E/F Last Name District of Illinois (State) Orm 106E/F Land accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for country contracts or unexpired leases that could result in a claim. Also list executory contracts and Unexpired Leases (Official Form 106G). Do not income Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not income Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed oxes on the left. Attach the Continuation Page to this page. On the top of any additional control of Page 10 part 2. All of Your PRIORITY Unsecured Claims Feditors have priority unsecured claims. If a creditor has more than one priority unsecured claim, list that type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here a cossible, list the claims in alphabetical order according to the creditor's name. If you have more that on Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part planation of each type of claim, see the instructions for this form in the instruction booklet.) | Charlene Hall First Name Middle Name Last Name Ankruptcy Court for the: Northern District of Illinois Corm 106E/F ILLIE E/F: Creditors Who Have Unsecured Claims and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with Nonecutory contracts or unexpired leases that could result in a claim. Also like executory contracts on Schedul. Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditor in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you oxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your All of Your PRIORITY Unsecured Claims reditors have priority unsecured claims against you? To to Part 2. Your priority unsecured claims in a lababetical order according to the creditor's name, list the creditor separate in Part 3. If a creditor holds a particular claim, list the other creditors in Part 3. Planation of each type of claim, see the instructions for this form in the instruction booklet.) | Charlene Hall First Name Middle Name Last Name Birist Name Middle Name Last Name Bankruptcy Court for the: Morthern District of Illinois (State) Check if this is an accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims accurate as possible. Use Part 1 for creditors with partially set in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially set in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, in oxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case in All of Your PRIORITY Unsecured Claims reditors have priority unsecured claims against you? So to Part 2. Your priority unsecured claims is alphabetical order according to the creditor's name. If you have more than two priority and nonpriority and particular claim, list the claim here and show both priority and nonpriority and particular claim, list the other creditors in Part 3. Planation of each type of claim, see the instructions for this form in the instruction booklet.) |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 25 of 82

| Debto | | Hall Case number (if known) | | | | |
|---------|--|---|-------------|--|--|--|
| David 6 | | Last Name | | | | |
| | 2: List All of Your NONPRIORITY Unsecured Clai | | | | | |
| 3. I | Do any creditors have nonpriority unsecured claims against you? | | | | | |
| | No. You have nothing to report in this part. Submit this form to | the court with your other schedules. | | | | |
| | Yes. | | | | | |
| | | ical order of the creditor who holds each claim. If a creditor has more t ch claim listed, identify what type of claim it is. Do not list claims already inc | | | | |
| | | ditors in Part 3.If you have more than four priority unsecured claims fill out the | | | | |
| F | Page of Part 2. | | | | | |
| | | | Total claim | | | |
| 4.1 | AAA Community Finance | Last 4 digits of account number | \$300.00 | | | |
| | Nonpriority Creditor's Name Po Box 190 | When was the debt incurred? | | | | |
| | Number Street | As of the date you file the claim is Check all that apply | | | | |
| | | As of the date you file, the claim is: Check all that apply. Contingent | | | | |
| | 5 11 12 12 12 12 12 12 12 12 12 12 12 12 | Unliquidated | | | | |
| | Bethalto Illinois 62010 City State Zip Code | — = ' | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | |
| | ✓ Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | | | | |
| | Check if this claim relates to a community debt | debts | | | | |
| | Is the claim subject to offset? | ✓ Other. Specify Payday loan | | | | |
| | <u>✓</u> No | | | | | |
| | Yes | | | | | |
| 4.2 | American Web Loan Nonpriority Creditor's Name | Last 4 digits of account number | \$800.00 | | | |
| | 522 N 14th St, | When was the debt incurred?n/a | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | Ponca City Oklahoma 74601 | Unliquidated | | | | |
| | City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | <u></u> | Student loans | | | | |
| | Debtor 2 and Debtor 3 and | Obligations arising out of a separation agreement or divorce | | | | |
| | Debtor 1 and Debtor 2 only | that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | | | | |
| | Check if this claim relates to a community debt | debts ✓ Other. Specify Payday loan | | | | |
| | Is the claim subject to offset? | T dyddy fodi'i | | | | |
| | Yes | | | | | |
| 40 | ASHRO | | 4000.00 | | | |
| 4.3 | Nonpriority Creditor's Name | Last 4 digits of account number | \$608.00 | | | |
| | 1112 7th Avenue Number Street | When was the debt incurred?n/a | | | | |
| | Trained Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | - | Contingent | | | | |
| | Monroe Wisconsin 53566 | Unliquidated | | | | |
| | City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | | | | |
| | At least one of the debtors and another | that you did not report as priority claims | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Is the claim subject to offset? | ✓ Other. Specify <u>Loan</u> | | | | |
| | ✓ No | _ | | | | |
| | Yes | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 26 of 82

Debtor 1 Charlene Hall Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 ATG CREDIT \$313.00 Last 4 digits of account number _ Nonpriority Creditor's Name 1700 W CORTLAND ST STE 2 When was the debt incurred? 6/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent CHICAGO 60622 Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? **✓** 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify _ MEDICAL PAYMENT DATA Yes 4.5 Bank of America \$1,012.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 26078 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated North Carolina 27420 Greensboro City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Overdraft/insufficient funds Other. Specify Is the claim subject to offset? **✓** No Yes **Big Picture Loans** \$500.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 704 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Michigan Watersmeet 49969 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Payday loan Is the claim subject to offset? **✓** No

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 27 of 82

Debtor 1 Charlene Hall Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 Blue Trust Loans \$450.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 1754 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Wisconsin 54843 Hayward City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Payday loan Is the claim subject to offset? **✓** No Yes CAPITAL ONE BANK USA NA \$1,757.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 85520 When was the debt incurred? 4/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent RICHMOND Virginia 23285 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? CreditCard ✓ Other. Specify **✓** No Yes CB/ASTEWRT \$391.00 Last 4 digits of account number Nonpriority Creditor's Name 220 W SCHROCK RD When was the debt incurred? 10/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent COLUMBUS 43081 Ohio Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify CreditCard **✓** No

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 28 of 82

Debtor 1 Charlene Hall Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 cb/carson \$731.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO BOX 15521 10/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent 19805 Wilmington Delaware Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify CreditCard **✓** No Yes CB/LIMITED 4.11 \$459.00 Last 4 digits of account number Nonpriority Creditor's Name 555 W. 112TH AVE When was the debt incurred? 11/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **NORTHGLENN** 80234 Colorado Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|~**| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard ✓ Other. Specify **✓** No Yes CB/PIER1 4.12 \$414.00 Last 4 digits of account number _ Nonpriority Creditor's Name 100 Pier 1 Pl When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Fort Worth 76102 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify _ CreditCard **✓** No

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 29 of 82

Charlene Debtor 1 Hall Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 CCB/GAMESTOP \$282.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 182120 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Ohio 43218 Columbus Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify CreditCard **✓** No l Yes 4.14 Chase Bank \$350.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 659732 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated San Antonio Texas 78265 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt ✓ Other. Specify Overdraft/insufficient funds fees Is the claim subject to offset? **✓** No Yes 4.15 City of Chicago - Dep't of Revenue \$200.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 88292 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60608 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify Red light camera ticket Is the claim subject to offset? **✓** No

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 30 of 82

<u>Charle</u>ne Debtor 1 Hall Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 COMENITY BANK/ASHSTWRT \$391.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 43218 Columbus Ohio Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify CreditCard **✓** No | Yes COMENITY BANK/NWYRK&CO 4.17 \$249.00 Last 4 digits of account number Nonpriority Creditor's Name 220 W SCHROCK RD When was the debt incurred? 10/1/2014 As of the date you file, the claim is: Check all that apply. Contingent Ohio_ WESTERVILLE 43081 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? CreditCard Other. Specify _ **✓** No Yes 4.18 COMENITY BANK/VCTRSSEC \$332.00 Last 4 digits of account number _ Nonpriority Creditor's Name Po Box 182273 When was the debt incurred? 11/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent Ohio 43218 Columbus Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify _ CreditCard **✓** No

l Yes

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 31 of 82

<u>Charle</u>ne Debtor 1 Hall Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** COMENITY CAPITAL/GMSTOP 4.19 \$316.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 182120 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent COLUMBUS 43218 Ohio Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify CreditCard **✓** No Yes CREDIT ONE BANK NA 4.20 \$1,182.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 98875 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent LAS VEGAS 89193 Nevada Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? CreditCard Other. Specify **✓** No Yes 4.21 **CREDITONEBNK** \$1,091.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 98872 When was the debt incurred? 5/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent LAS VEGAS Nevada 89193 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify _ CreditCard **✓** No

l Yes

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 32 of 82

Debtor 1 Charlene Hall Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 FIRST PREMIER BANK \$802.00 Last 4 digits of account number _ Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent Saint Cloud City 56302 Minnesota Unliquidated State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify CreditCard **✓** No Yes 4.23 **FST PREMIER** \$789.00 Last 4 digits of account number Nonpriority Creditor's Name 3820 N LOUISE AVE When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 57107 SIOUX FALLS South Dakota Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? CreditCard ✓ Other. Specify ____ **✓** No Yes 4.24 Green Trust Cash LLC \$450.00 Last 4 digits of account number Nonpriority Creditor's Name 153 Maiden Lane 3rd Floore When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 94108 California San Francisco State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify _ Payday loan Is the claim subject to offset? **✓** No

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 33 of 82

Debtor 1 Charlene Hall Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.25 MERCHANTS CREDIT GUIDE \$120.00 Last 4 digits of account number _ Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Illinois 60606 Chicago Unliquidated State Zip Code Citv Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify MEDICAL PAYMENT DATA Yes 4.26 Montgomery Ward \$213.00 Last 4 digits of account number Nonpriority Creditor's Name 3650 Milwaukee Street When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Wisconsin 53714 Madison City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Credit card Is the claim subject to offset? **✓** No Yes North Plain 4.27 \$400.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 516 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 59527 Hays Montana City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify Payday loan Is the claim subject to offset? **✓** No

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 34 of 82

| Debtor | | Hall Case number (if known) | | | | |
|---------|---|---|-------------|--|--|--|
| | First Name Middle Name La | ast Name | | | | |
| Part 2: | Your NONPRIORITY Unsecured Claims - Contin | nuation Page | | | | |
| | | | | | | |
| | | ing with 4.5, followed by 4.6, and so forth. | Total claim | | | |
| 4.28 | PLS - Bankruptcy | Last 4 digits of account number | \$3,984.17 | | | |
| | Nonpriority Creditor's Name 800 Jorie Blvd 2nd Floor | When was the debt incurred? | | | | |
| | Number Street | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | Oak Brook Illinois 60523 | Unliquidated | | | | |
| | City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. | <u> </u> | | | | |
| | ✓ Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | | | | |
| | At least one of the debtors and another | that you did not report as priority claims | | | | |
| | 븜 | Debts to pension or profit-sharing plans, and other similar | | | | |
| | Check if this claim relates to a community debt | debts Other Specify Developed | | | | |
| | Is the claim subject to offset? | ✓ Other. Specify Payday loan | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |
| 4.29 | Silver Cloud Financial | | \$500.00 | | | |
| 1.20 | Nonpriority Creditor's Name | Last 4 digits of account number | Ψ000.00 | | | |
| | 635 East Hwy 20C | When was the debt incurred?n/a | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | | | | | | |
| | Upper Lake California 95485 | Unliquidated | | | | |
| | City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | 블 | Student loans | | | | |
| | Debtor 2 only | = | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | | | | |
| | Check if this claim relates to a community debt | debts | | | | |
| | Is the claim subject to offset? | ✓ Other. Specify Payday loan | | | | |
| | No | | | | | |
| | = | | | | | |
| | Yes | | | | | |
| 4.30 | Stellar Rec | Last 4 digits of account number 8758 | \$603.00 | | | |
| | Nonpriority Creditor's Name 1327 Highway 2 Wes | When was the debt incurred? 6/1/2016 | | | | |
| | Number Street | When was the dest mounted: | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | |
| | Valianali Mantana 50001 | Contingent | | | | |
| | Kalispell Montana 59901 City State Zip Code | Unliquidated | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | · | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 1 and Debtor 2 only | Student loans | | | | |
| | = ' | Obligations arising out of a separation agreement or divorce | | | | |
| | At least one of the debtors and another | that you did not report as priority claims | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | | | | |
| | Is the claim subject to offset? | debts Collection: Collecting for | | | | |
| | ✓ No | Collection; Collecting for ORIGINAL CREDITOR: 11 | | | | |
| | Yes | Other. Specify COMCAST | | | | |
| | | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 35 of 82

Debtor 1 Charlene Hall Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.31 SYNCB/JCP \$172.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 965007 When was the debt incurred? 2/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent ORLANDO Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify _ CreditCard **✓** No Yes SYNCB/JCP 4.32 \$134.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965007 When was the debt incurred? 2/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent **ORLANDO** Florida 32896 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? CreditCard ✓ Other. Specify **✓** No Yes 4.33 SYNCB/LOWES \$315.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 103065 When was the debt incurred? 2/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent Georgia 30076 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard ✓ Other. Specify _ **✓** No

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 36 of 82

Debtor 1 Charlene Hall Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.34 SYNCB/WALMAR \$449.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965024 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **EL PASO** 79998 Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify _ CreditCard **✓** No l Yes WEBBNK/FHUT 4.35 \$1,043.00 Last 4 digits of account number 3767 Nonpriority Creditor's Name Po Box 166 When was the debt incurred? 4/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent 07101 Newark **New Jersey** Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard ✓ Other. Specify **✓** No Yes 4.36 ZocaLoans \$700.00 Last 4 digits of account number _ Nonpriority Creditor's Name c/o: Rosebud Lending LZO When was the debt incurred? As of the date you file, the claim is: Check all that apply. PO Box 1147 27565 Research Park Dr Contingent Unliquidated 57555 Mission South Dakota City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts ✓ Other. Specify Payday loan Is the claim subject to offset? **✓** No

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 37 of 82

Charlene Hall Debtor 1 Case number (if known) First Name Middle Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$105.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$105.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$22,802.17 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

\$22,802.17

6j. Total. Add lines 6f through 6i.

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 38 of 82

| Fill in this in | nformation to identify your cas | e: | | |
|-------------------------|------------------------------------|-------------------------------|--------------------------------|--|
| Debtor 1 | Charlene | | Hall | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if | filing) First Name | Middle Name | Last Name | |
| United State | es Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| Case numb (If known) | per | | | |
| (II KIIOWII) | | | | |
| Officia | al Form 106G | | | Check if this is a amended filing |
| Sched | lule G: Execut | ory Contracts | s and Unexpire | red Leases 12/ |
| space is ne | | | | are equally responsible for supplying correct information. If mor this page. On the top of any additional pages, write your name |
| 1. Do yo | u have any executory | contracts or unexpir | red leases? | |
| ✓ No. | Check this box and file this fo | rm with the court with your o | other schedules. You have not | othing else to report on this form. |
| Yes. | . Fill in all of the information b | elow even if the contracts or | r leases are listed on Schedul | dule A/B: Property (Official Form 106A/B). |
| | | | | Then state what each contract or lease is for (for example, rent, re examples of executory contracts and unexpired leases. |

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 39 of 82

| Fill in this inf | ormation to identify your cas | se: | | |
|-----------------------------------|---|---|---|--|
| Debtor 1 | Charlene | | Hall | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | ling) = | | | |
| (Spouse, if fi | lling) First Name | Middle Name | Last Name | |
| United State | s Bankruptcy Court for the: | Northern | District of Illinois | |
| 0 | | | (State) | |
| Case number (If known) | er | | | |
| · | | | | Check if this is ar |
| | | | | amended filing |
| Officia | I Form 106H | | | |
| | _ | | | |
| Schea | ule H: Your C | odeptors | | 12/15 |
| ✓ No ☐ Ye 2. Within to Idaho, Lo | the last 8 years, have you ouisiana, Nevada, New Mex o. Go to line 3. s. Did your spouse, former s | lived in a community propico, Puerto Rico, Texas, Was | shington, and Wisconsin.) e with you at the time? | debtor.) community property states and territories include Arizona, California, the name and current address of that person. |
| | Name of your spouse, f | ormer spouse, or legal equiv | alent | |
| | Number Street | | | _ |
| | City | State | Zip Code | _ |
| again a | s a codebtor only if that p | erson is a guarantor or co | signer. Make sure you hav | our spouse is filing with you. List the person shown in line 2 re listed the creditor on <i>Schedule D</i> (Official Form 106D), rele D, Schedule E/F, or Schedule G to fill out Column 2. |
| Column | 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt |

Official Form 106H Schedule H: Your Codebtors page 1

Check all schedules that apply:

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 40 of 82

| Ellin dele i | | | | | | |
|------------------------------|--|---|-------------------------------|------------------|-------------------|---|
| | nformation to identif | y your case: | | | | |
| Debtor 1 | Charlene First Name | Middle Name | Hall Last Nam | ie. | - | |
| Debtor 2 | Tilotivanic | Wildale Name | Lastivan | | | Check if this is: |
| | ng) First Name | Middle Name | Last Nam | ie | _ | An amended filing |
| United States | Bankruptcy Court for the: | Northern | District of Illino | | - | A supplement showing post-petition chapter 1sexpenses as of the following date: |
| Case number (If known) | | | (Olat | | - | MM / DD / YYYY |
| Official | Form 106I | | | | | |
| Schedu | ıle I: Your Ind | come | | | | 12/1 |
| include info additional p | ormation about you | r spouse. If more spa ame and case numbe | ce is needed | , attach a s | eparate she | se is not filing with you, do not eet to this form. On the top of any |
| | l in your employment | | Debtor 1 | | | Debtor 2 |
| lf y job | | Employment status | Employed Not Emplo | byed | | Employed Not Employed |
| | ach a separate page with ormation about additional | Occupation | | | | |
| | ployers. | Employer's name | Altom Transp | ort Inc. | | |
| or | clude part time, seasonal, | Employer's address | 1646 E. Sumr Number Street | | | Number Street |
| | ccupation may include | | | | | _ |
| or | homemaker, if it applies. | | Hammond City | Indiana State | 46320 Zip Code | City State Zip Code |
| | | How long employed there? | | | | |
| Estimate moyou are sepa | rated. non-filing spouse have mo | date you file this form. If yo | | | | the space. Include your non-filing spouse unless on on the lines below. If you need more space, |
| attach a sepa | arate sheet to this form. | | | For D | ebtor 1 | For Debtor 2 or non-filing spouse |
| | | ry, and commissions (befor alculate what the monthly wag | | | \$3,753.23 | |
| 3. Estima | te and list monthly over | time pay. | 3. | | + \$0.00 | |

Official Form 106I Schedule I: Your Income page 1

\$3,753.23

4. Calculate gross income. Add line 2 + line 3.

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 41 of 82

| Debtor ' | Charlene First Name | Middle Name | Hall Last Name | | Case numbe | 「 (if known) | | _ |
|---------------------------------------|---|--|--|----------|-----------------------|-----------------------------------|-------|-------------------------|
| | i iist ivaille | Middle Haine | Last Ivaine | | For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Сору | line 4 here | | → | 4. | \$3,753.23 | | • | |
| 5. List a | II payroll ded | | | | | | | |
| 5a. T | ax, Medicare, | and Social Security deductions | | 5a. | \$890.20 | | | |
| | | ntributions for retirement plans | | 5b. | \$0.00 | | | |
| 5c. V | oluntary cont | ributions for retirement plans | | 5c. | \$0.00 | | | |
| 5d. R | equired repa | yments of retirement fund loans | | 5d. | \$0.00 | | | |
| | nsurance | , | | 5e. | \$271.40 | | | |
| | | ort obligations | | 5f. | \$0.00 | | | |
| | Jnion dues | | | 5g. | \$0.00 | | | |
| • | | ons. Specify: | | 5h. + | \$0.00 | | | |
| | | ductions. Add lines 5a + 5b + 5c + 5d + 5e +5 | | 6. | \$1,161.59 | | | |
| +5h. | ne payron det | adetions. Add inles 3a + 3b + 3c + 3d + 3e + | 31 + 3g | 0. | φ1,101.33 | | | |
| 7. Calcu | ılate total mor | nthly take-home pay. Subtract line 6 from line | e 4. | 7. | \$2,591.64 | | | |
| 8. List a | II other incom | e regularly received: | | | | | | |
| b | usiness, prof | om rental property and from operating a ession, or farm ent for each property and business showing gr | ross | | | | | |
| re | | y and necessary business expenses, and the to | | 8a. | \$0.00 | | | |
| 8b. Ir | nterest and di | vidends | | 8b. | \$0.00 | | | |
| d | ependent reg | • | or a | | | | | |
| d | ivorce settleme | spousal support, child support, maintenance, nt, and property settlement. | | 8c. | \$0.00 | | | |
| 8d. U | Inemploymen | t compensation | | 8d. | \$0.00 | | | |
| 8e. S | ocial Security | | | 8e. | \$0.00 | | | |
| In as th su | clude cash ass ssistance that y e Supplementa ubsidies | ent assistance that you regularly receive istance and the value (if known) of any non-cas ou receive, such as food stamps (benefits unde al Nutrition Assistance Program) or housing | | | | | | |
| | pecify: | | | 8f. | \$0.00 | | | |
| Ū | | irement income | | 8g. | \$0.00 | | | |
| | - | income. Specify: | | 8h. + | \$0.00 | + | 7 | |
| 9. Add a | all other incon | ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g | + 8h. | 9. | \$0.00 | |] | |
| | | income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing s | spouse | 10. | \$2,591.64 | + | = | \$2,591.64 |
| 11. State Inclue relati Do n | e all other reg de contributions ves. ot include any a | ular contributions to the expenses that your form an unmarried partner, members of your lamounts already included in lines 2-10 or amounts | ou list in <i>Sc.</i> household, y | our depe | ndents, your roommate | | 1 | |
| Spec | cify: | | | | | | 11. + | \$0.00 |
| | | n the last column of line 10 to the amount n the Summary of Schedules and Statistical Su | | | | | 12. | \$2,591.64 |
| | | | | | | | | Combined monthly income |
| | No. | increase or decrease within the year after y | you file this | form? | | | | |
| Ш | Yes. Explain: | | | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 42 of 82

| Fill in this infor | mation to identify your ca | ise: | | | | |
|---------------------------------|---|--|--|-------------------|----------------------------|--------------|
| Debtor 1 | Charlene | | Hall | | | |
| 200101 | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | Check if this is: | | |
| (Spouse, if filin | g) First Name | Middle Name | Last Name | An amended filing | a | |
| United States B | Bankruptcy Court for the: | Northern | District of Illinois | A supplement she | owing post-petition | |
| Case number | | | (State) | expenses as of th | e following date: | |
| (If known) | | | | MM / DD / YYYY | , | |
| Official | Form 106J | | | | | |
| Schedu | le J: Your E | xpenses | | | | 12/15 |
| information. If (if known). Ans | more space is needed wer every question. | , attach another sheet to this t | e filing together, both are equally r form. On the top of any additional | | | umber |
| | cribe Your Housel | nold | | | | |
| 1. Is this a join | nt case? | | | | | |
| ✓ No. Go | to line 2 | | | | | |
| Yes. D | oes Debtor 2 live in a s | separate household? | | | | |
| | No | | | | | |
| | Yes. Debtor 2 must fi | le Official Forms 106J-2, Expens | ses for Separate Household of Debto | r2. | | |
| 2. Do you hav | | No | | | | |
| Do not list D Debtor 2. | ebtor 1 and | es. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependently with you? | dent live |
| | penses include of people other | No | | | | |
| than | · · · | ⁄es | | | | |
| yourself an dependent | d your $lacksquare$ | | | | | |
| | | g Monthly Expenses | | | | |
| | | | | | | |
| - | of a date after the banl | | ou are using this form as a suppl plemental Schedule J, check the | • | • | |
| | | cash government assistance it on Schedule I: Your Income | | | Yo | our expenses |
| 4. The rental | or home ownership ex | penses for your residence. Ind | clude first mortgage payments and | | | \$500.00 |
| | or the ground or lot. 4. | | and the state of t | | 4. | φυσυσσ |
| | uded in line 4: | | | | | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |
| 4b. Proper | ty, homeowner's, or rent | er's insurance | | | 4b. | \$0.00 |
| 4c. Home | maintenance, repair, and | upkeep expenses | | | 4c. | \$0.00 |
| 4d. Home | owner's association or co | ondominium dues | | | 4d. | \$0.00 |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 43 of 82

Charlene Hall Debtor 1 Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$65.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$75.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$400.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services 10. \$18.00 11. Medical and dental expenses \$18.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$217.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$240.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$308.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 44 of 82

| Debtor 1 | Charlene | | Hall | Case number (if known) | | |
|-------------------|--------------------------|--|-----------------------------|------------------------|-----|------------|
| | First Name | Middle Name | Last Name | | | |
| 21.Other | . Specify: | | | | 21 | \$0.00 |
| 22. Calc ι | ılate your monthly exp | oenses. | | | | \$1,891.00 |
| 22a. <i>A</i> | Add lines 4 through 21. | | | | | \$0.00 |
| 22b. C | Copy line 22 (monthly ex | openses for Debtor 2), if any, fro | om Official Form 106J-2 | | | \$1,891.00 |
| 22c. A | add line 22a and 22b. Th | ne result is your monthly expen | ses. | | 22. | Ψ1,031.00 |
| 23.Calcu | late your monthly net | income. | | | | |
| 23a. C | Copy line 12 (your comb | ined monthly income) from Sch | nedule I. | | 23a | \$2,591.64 |
| 23b. C | Copy your monthly exper | nses from line 22 above. | | | 23b | \$1,891.00 |
| | | penses from your monthly inco | me. | | | \$700.64 |
| | The result is your month | nly net income. | | | 23c | |
| 24. Do y o | ou expect an increase | or decrease in your expens | es within the year after yo | u file this form? | | |
| | | to finish paying for your car loa se or decrease because of a r | | | | |
| ✓ 1 | No | | | | | |
| | ⁄es | | | | | |
| | Explain here: | | | | | |
| | • | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 45 of 82

| Fill in this information to identify your case: | | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|--|
| Debtor 1 | Charlene First Name | Middle Name | Hall Last Name | | | | | |
| Debtor 2 (Spouse, if fill | ing) First Name | Middle Name | Last Name | | | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | | |
| Case number (If known) | | | (Claib) | | | | | |

Official Form 106Dec

| Check if this is a |
|--------------------|
| amended filing |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t1: Sign Below | | | | | | | |
|-----|---|---|--|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | |
| | ☑ No | | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary at that they are true and correct. | nd schedules filed with this declaration and | | | | | | |
| x | · | × | | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | | |
| | Date 11/10/2016 | Date | | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 46 of 82

| Fill in this info | rmation to identify your ca | se: | | | | | |
|-------------------|-----------------------------|------------------------|---------------------------------------|---------------|--------|----------|--|
| Debtor 1 | Charlene | N.C. I. II. N | Hall | | | | |
| Debtor 2 | First Name | Middle N | lame Last Nan | ne | | | |
| | ng) First Name | Middle N | lame Last Nan | ne | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illino | ois | | | |
| Case number | | | (Sta | te) | | | |
| (If known) | - | | | _ | | | |
| Official | Form 107 | | | | | | Check if this is amended filing |
| | | ial Affaire | for Individu | ale Eiling f | or Ra | nkruntes | |
| | | | | _ | | | |
| | | | n the top of any addition | | | | correct information. If mo known). Answer every |
| question. | , | | · · · · · · · · · · · · · · · · · · · | p g | | | , |
| Part 1: Giv | ve Details About You | ır Marital Status | s and Where You Liv | ved Before | | | |
| | | | S and Where Tou Er | ved Belole | | | |
| 1. What i | s your current marital s | tatus? | | | | | |
| M | arried | | | | | | |
| ✓ No | ot married | | | | | | |
| 2. During | the last 3 years, have yo | ou lived anywhere | other than where you live | e now? | | | |
| ✓ No | n | | | | | | |
| | | lived in the last 3 ye | ars. Do not include where y | ou live now. | | | |
| | | | | | | | |
| De | ebtor 1: | | Dates Debtor 1 lived | Debtor 2: | | | Dates Debtor 2 lived |
| | | | there | | | | there |
| | | | | Same as Deb | otor 1 | | Same as Debtor 1 |
| _ | | | From | | | | From |
| Nu | umber Street | | · | Number Street | | | |
| _ | | | То | - | | | To |
| Ci | ty State | Zip Code | | City | State | Zip Code | |
| | ty State | Zip Code | | Same as Deb | | Zip Code | Same as Debtor 1 |
| | | | | | | | |
| Nu | umber Street | | From | Number Street | | | From |
| _ | | | То | | | | То |
| _ | | | | | | | |
| Ci | ty State | Zip Code | | City | State | Zip Code | |

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

✓ No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 47 of 82

| Debte | | Hall Name Last Nan | | umber (if known) | |
|--------------|---|--|---|--|--|
| Part : | | | | | |
| 4. | Did you have any income from employmerill in the total amount of income you receive activities. If you are filing a joint case and you not | nent or from operating a bused from all jobs and all busine | sses, including part-time | | ears? |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | From January 1 of current year until the date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$36392.71 | Wages, commissions, bonuses, tips Operating a business | |
| | For last calendar year: (January 1 to December 31, 2015) YYYY | Wages, commissions, bonuses, tips Operating a business | \$43747.00 | Wages, commissions, bonuses, tips Operating a business | |
| | For the calendar year before that: (January 1 to December 31, 2014) YYYY | Wages, commissions, bonuses, tips Operating a business | \$45253.00 | Wages, commissions, bonuses, tips Operating a business | |
| lr b c | Did you receive any other income during include income regardless of whether that income refit payments; pensions; rental income; in ase and you have income that you received ist each source and the gross income from No | come is taxable. Examples of nterest; dividends; money colle together, list it only once under | other income are alimony; chected from lawsuits; royalties; r Debtor 1. | ; and gambling and lottery winn | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | From January 1 of current year until the date you filed for bankruptcy: | | | | |
| | For last calendar year: (January 1 to December 31, 2015) YYYY | | | | |
| | For the calendar year before that: (January 1 to December 31, 2014) YYYY | - | | | |
| | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 48 of 82

| | irst Name | | Middle Name | Hall Last Name | Case nun | nber (if known) | |
|---------|----------------------|---------------|---|--|---|---------------------------------|------------------------|
| a Li | ist Certain | Paymen | its You Made F | Before You Filed for | r Bankruntev | | |
| | ist ocitain | 1 ayıncı | its fou made i | Scioic four fied for | Ванкгартоу | | |
| re eitl | her Debtor 1 | 's or Debto | or 2's debts prima | arily consumer debts? | | | |
| No | | | Debtor 2 has pri I, family, or househ | | Consumer debts are defined | d in 11 U.S.C. § 101(8) as "inc | urred by an individual |
| | During the | 90 days bef | ore you filed for ba | nkruptcy, did you pay any o | creditor a total of \$6,425* or m | nore? | |
| | No. G | o to line 7. | | | | | |
| | 1 | total amoun | t you paid that cred | ditor. Do not include payme | .5* or more in one or more pa ents for domestic support obli to an attorney for this bankru | gations, such as | |
| | * Subject to | adjustment | t on 4/01/19 and ev | very 3 years after that for ca | ases filed on or after the date | of adjustment. | |
| Yes | s. Debtor 1 o | or Debtor 2 | or both have pri | marily consumer debts | | | |
| _ | During the | 90 days bef | ore you filed for ba | nkruptcy, did you pay any o | creditor a total of \$600 or mor | e? | |
| | _ | o to line 7. | • | | | | |
| | 1 | that creditor | . Do not include pa | m you paid a total of \$600 ayments for domestic supp ayments to an attorney for | or more and the total amount oort obligations, such as child this bankruptcy case. | you paid I support and | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| Cr | reditor's Nam | e | | | | | Mortgage |
| Nı | umber Street | | | | | | Car Credit card |
| _ | | | | | | | Loan repayment |
| Ci | th. | State | Zip Code | | | | Suppliers or vendors |
| Oi | ity | State | Zip Gode | | | | Other |
| Cr | reditor's Nam | е | | | | | Mortgage |
| Nı | umber Street | | | | | | Car Credit card |
| _ | difficer Officer | | | | | | Loan repayment |
| _ | | | | | | | Suppliers or |
| Ci | ty | State | Zip Code | | | | vendors Other |
| | enditoula Na | | | | | - | Mortgage |
| Cr | reditor's Nam | e | | | | | Car |
| Νι | umber Street | · | | | | | Credit card |
| _ | | | | | | | Loan repayment |
| Ci | ty | State | Zip Code | | | | Suppliers or vendors |
| | | | | | | | Other |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 49 of 82

| Debtor 1 | Charlene First Name | | Middle Name | Hall Last | Name | Case number (| if known) |
|-----------------------|---------------------------------------|--|---|--|--|--|---|
| Insid corp agei | ders include your roorations of which | elatives; any you are an c or a busines: | y general partners; officer, director, per s you operate as a | relatives of any g son in control, or | eneral partners; par owner of 20% or mo | tnerships of which y ore of their voting se | ho was an insider? You are a general partner; Curities; and any managing Mestic support obligations, |
| ✓ | No Yes. List all paym | ents to an in | sider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| 3. With | | you filed fo | or bankruptcy, dic | d you make any | payments or trans | fer any property o | n account of a debt that benefited an |
| | ide payments on d | ebts guaran | teed or cosigned by | y an insider. | | | |
| | Yes. List all payme | ents that ber | nefited an insider. | Dates of | Total amount | Amounting | Decean for this payment |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | | | | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| - | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | • | | | | | | I . |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 50 of 82

| Deb | tor 1 | | | | Hall | c | Case number (if | known) | |
|------|--------|--|---------------|--------------|---|-------------------------------|-----------------|----------|-------------------------------------|
| | | First Name | | Middle Name | Last Name | | | | |
| Part | 4: | Identify Legal | Actions, Re | epossessions | s, and Foreclosure | es | | | |
| | List a | all such matters, incluant disputes. | | | rou a party in any laws all claims actions, divorc | | | | ng? r custody modifications, and |
| | | No Yes. Fill in the detail | S. | | | | | | |
| | | | | Natu | ire of the case | Court or a | agency | | Status of the case |
| | | Case title | | | | | | | Pending |
| | | | | | | Court Nan | ne | | On appeal |
| | | Case number | | | | NumberSt | reet | | Concluded |
| | | | | | | | | | |
| | | Case title | | | | City | State | Zip Code | |
| | | | | | | Court Nam | ne | | Pending |
| | | Case number | | | | | | | On appeal Concluded |
| | | | | | | NumberSt | reet | | Conduct |
| | | | | | | City | State | Zip Code | |
| | | No. Go to line 11. Yes. Fill in the infor | mation below. | | Describe the prop | erty | | Date | Value of the property |
| | | _ | | | | | | | |
| | | Creditor's Name | | | Explain what happ | pened | | | |
| | | Number Street | | | _ | | | | |
| | | | | | Property was re | • | | | |
| | | | | | Property was for Property was g | | | | |
| | | City | State | Zip Code | | ttached, seized, | or levied. | | |
| | | | | · | Describe the prop | | | Date | Value of the property |
| | | | | | | | | | |
| | | Creditor's Name | | | Explain what happ | pened | | | |
| | | Number Street | | | | | | | |
| | | | | | Property was re | | | | |
| | | | | | Property was fo | | | | |
| | | City | State | Zip Code | Property was a | arnished. ttached, seized, | or levied | | |
| | | Oity | Jidio | Zip Oode | L Topetty was a | wow was something, | or levieu. | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 51 of 82

| Debte | or 1 | Charlene | | Hall | Case number (if known) | | |
|-------|----------|--|-----------|--------------------------|--------------------------------|--------------------------|---------------------|
| | | First Name Middle Name | | Last Name | | | |
| | | thin 90 days before you filed for bankruptc ounts or refuse to make a payment becaus | | | bank or financial institution, | set off any amou | ints from your |
| | ✓ | No Yes. Fill in the details. | | | | | |
| | | | | Describe the action t | he creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | Number Street | | Last 4 digits of account | number: XXXX- | | |
| | | City State Zip Code |) | | | | |
| | | hin 1 year before you filed for bankruptcy, ointed receiver, a custodian, or another of | | of your property in the | possession of an assignee f | or the benefit of | creditors, a court- |
| | ✓ | No Yes | | | | | |
| Part | 5. | List Certain Gifts and Contributio | ns | | | | |
| | | | | | | | |
| 13. | Wi | ithin 2 years before you filed for bankrupto | y, did yo | ou give any gifts with a | total value of more than \$600 | per person? | |
| | ✓ | | | | | | |
| | | Yes. Fill in the details for each gift. | | | | | |
| | | Gifts with a total value of more than \$600 per person |) | Describe the gifts | | Dates you gave the gifts | Value |
| | | | | | | | |
| | | Person to Whom You Gave the Gift | | | | | |
| | | Number Street | | | | | |
| | | City State Zip Code Person's relationship to you |) | | | | |
| | | Person to Whom You Gave the Gift | | | | | |
| | | Number Street | | | | | |
| | | City State Zip Code Person's relationship to you |) | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 52 of 82

| Debt | or 1 | Charlene | | Hall | Case number (if known | n) | |
|------|----------|---|---------------------------|---|------------------------------|-----------------------------------|------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 14. | Wit | hin 2 years before you file | ed for bankruptcy, did | you give any gifts or contribu | itions with a total value o | of more than \$600 | to any charity? |
| | V | No | | | | | |
| | Ħ | Yes. Fill in the details for e | ach gift or contribution. | | | | |
| | | Gifts or contributions to | - | Describe what you contri | ibuted | Date you | Value |
| | | that total more than \$60 | | , | | contributed | |
| | | | | | | | |
| | | Charity's Name | | - | | | |
| | | | | - | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| | | Oit : Otata | 7:a Cada | - | | | |
| | | City State | Zip Code | | | | |
| Part | 6: | List Certain Losses | | | | | |
| | | nin 1 year before you filed abling? No Yes. Fill in the details. | l for bankruptcy or sir | nce you filed for bankruptcy, d | id you lose anything bed | ause of theft, fire, | other disaster, or |
| | | Describe the property yo how the loss occurred | ou lost and | Describe any insurance of Include the amount that insupending insurance claims of A/B: Property. | urance has paid. List | Date of your loss | Value of property lost |
| | | | | | | | |
| | | No Yes. Fill in the details. | cy pennon preparers, or | credit counseling agencies for se | ervices required in your bar | ктирксу. | |
| | | | | Description and value of transferred | any property | Date payment or transfer was made | Amount of payment |
| | | LAW FIRM | | Attorney's Fee - 500.00 | | 11/5/2016 | \$500.00 |
| | | Person Who Was Paid | | | | | |
| | | 11101 S. Western Avenue | | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | Chicago Illinois | | | | | |
| | | City State | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Pay | ment, if Not You | | | | |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Email or website address | | - | | | |
| | | Person Who Made the Pay | mont if Not You | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 53 of 82

| Deb | tor 1 | Charlene | | Hall | Case number (if known) | | |
|-----|----------|---|------------------------|---|--------------------------------|-----------------------|------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | hin 1 year before you filed by you deal with your credite not include any payment or tra No Yes. Fill in the details. | ors or to make payment | s to your creditors? | your behalf pay or transfer a | any property to anyor | ne who promised to |
| | ш | res. I ili ili the details. | | | | | |
| | | | | Description and value o transferred | f any property | | mount of ayment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | City State | Zip Code | | | | |
| | | ude both outright transfers ar sfers that you have already lis No Yes. Fill in the details. | | | a security interest or mortgag | | |
| | | | | Description and value or property transferred | | ceived or debts paid | Date transfer was made |
| | | Person Who Received Train | nsfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code u | | | | |
| | | Person Who Received Train | nsfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code u | | | | |
| 19. | | hin 10 years before you file ese are often called asset-pro | | ou transfer any property to | a self-settled trust or simil | ar device of which yo | u are a beneficiary? |
| | Y | No | | | | | |
| | Ц | Yes. Fill in the details. | | Description and value | of the property transferred | | Date transfer was made |
| | | Name of trust | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 54 of 82

| Debtor 1 | Charlene First Name Middle Name | Hall Last Name | Case number (if known) | |
|-----------------------|--|-----------------------------------|--|--|
| Part 8: | List Certain Financial Accounts, Ins | | oves and Storage Units | |
| 20. Wit mo Incl | thin 1 year before you filed for bankruptcy, we oved, or transferred? | ere any financial accounts or ins | truments held in your name, or for your benefit, cosit; shares in banks, credit unions, brokerage houses | |
| ✓ | No Yes. Fill in the details. | | | |
| | | Last 4 digits of account number | Type of account or instrument account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | Person Who Was Paid | - XXXX- | Checking Savings | |
| | Number Street | - | Money market Brokerage Other | |
| | City State Zip Code | - | | |
| | Person Who Was Paid | = XXXX- _ | Checking Savings | |
| | Number Street | _ | Money market Brokerage | |
| | | | Other | |
| | you now have, or did you have within 1 year ler valuables? No Yes. Fill in the details. | | any safe deposit box or other depository for secu | |
| | | Who else had access to it? | Describe the contents | Do you still have it? |
| | Name of Financial Institution | Name | | ☐ No ☐ Yes |
| | Number Street | Number Street | | _ |
| | City State Zip Code | City State Zi | p Code | |
| 22. Hav | ve you stored property in a storage unit or pla | ace other than your home within | 1 year before you filed for bankruptcy? | |
| ✓ | No Yes. Fill in the details. | | | |
| _ | • | Who else had access to it? | Describe the contents | Do you still have it? |
| | Name of Storage Facility | Name | | ☐ No ☐ Yes |
| | Number Street | Number Street | | П ₁₆₉ |
| | City State Zip Code | City State Zi | p Code | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 55 of 82

| First Name Middle Name Last Name Identify Property You Hold or Control for Someone Else | |
|---|--|
| t9: Identify Property You Hold or Control for Someone Else | |
| | |
| Do you hold or control any property that someone else owns? Include any property you borrowed from, at | re storing for or hold in trust for |
| someone. | re storing for, or floid in trust for |
| | |
| ✓ No Vos Fill in the details | |
| Yes. Fill in the details. | - Contanta Value |
| Where is the property? Describe the | contents |
| Owner's Name Number Street | |
| | |
| Number Street | |
| | |
| City State Zip Code | |
| City State Zip Code | |
| Cive Details About Environmental Information | |
| t10: Give Details About Environmental Information | |
| the purpose of Part 10, the following definitions apply: | |
| ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, relea | ases of |
| hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other med | |
| including statutes or regulations controlling the cleanup of these substances, wastes, or material. | |
| Site means any location, facility, or property as defined under any environmental law, whether you now own, operate | , or utilize it |
| or used to own, operate, or utilize it, including disposal sites. | |
| Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, | |
| toxic substance, hazardous material, pollutant, contaminant, or similar term. | |
| | |
| port all notices, releases, and proceedings that you know about, regardless of when they occurred. | |
| port all notices, releases, and proceedings that you know about, regardless of when they occurred. | |
| eport all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a | an environmental law? |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a | an environmental law? |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No | an environmental law? |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. | |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. | an environmental law? al law, if you know it Date of notice |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. | al law, if you know it Date of |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. | al law, if you know it Date of |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. Governmental unit Name of site Governmental unit | al law, if you know it Date of |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. Governmental unit Environmental | al law, if you know it Date of |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. Governmental unit Name of site Number Street Number Street | al law, if you know it Date of |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. Governmental unit Name of site Number Street Number Street City State Zip Code | al law, if you know it Date of |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. Governmental unit Name of site Number Street Number Street | al law, if you know it Date of |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. Governmental unit | al law, if you know it Date of |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. Governmental unit Name of site Number Street Number Street City State Zip Code Have you notified any governmental unit of any release of hazardous material? | al law, if you know it Date of |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. Governmental unit Name of site Governmental unit Number Street Number Street City State Zip Code Have you notified any governmental unit of any release of hazardous material? | al law, if you know it Date of |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a limit of any release of hazardous material? No Yes. Fill in the details. Governmental unit Environmental unit | al law, if you know it Date of notice |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a limit of any release of hazardous material? No Yes. Fill in the details. Governmental unit Environmental unit | al law, if you know it Date of notice |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a limit of any release of hazardous material? No | al law, if you know it Date of notice |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a limit of any release of hazardous material? No Yes. Fill in the details. Governmental unit Environmental unit | al law, if you know it Date of notice |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a limit of any release of hazardous material? No | al law, if you know it Date of notice |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a No Yes. Fill in the details. Governmental unit Environmental | al law, if you know it Date of notice |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable or potentially liable under or in violation of a liable under or in violation | al law, if you know it Date of notice |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a limit of any release of hazardous material? No | al law, if you know it Date of notice |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 56 of 82

| Deb | otor 1 | Charlene | | | Hall | Case | number (if known) | |
|------|----------|-----------------------|------------------|------------------------|-------------------------------|--------------------|---|--------------------|
| | | First Name | | Middle Name | Last Name | | | |
| 26. | Hav | e you been a party | / in any judici | al or administra | ative proceeding under | any environmenta | al law? Include settlements and orders | S. |
| | ✓ | No | | | | | | |
| | | Yes. Fill in the deta | ils. | | | | | |
| | | | | | Court or agency | | Nature of the case | Status of the case |
| | | Case title | | | | | | Donding |
| | | - | | - | Court Name | | | Pending |
| | | | | | | | | On appeal |
| | | Case number | | | Number Street | | | Concluded |
| | | | | • | City State | Zip Code | | |
| Pari | t 11: | Give Details A | hout Your | Rusinass or | Connections to An | v Rusiness | | |
| Ган | | Give Details A | ibout ioui | business of | Connections to An | iy business | | |
| 27. | With | nin 4 years before | you filed for I | oankruptcy, did | you own a business or | have any of the fo | ollowing connections to any business | ? |
| | | _ | - | | | - | - | |
| | | | | | profession, or other activit | | part-time | |
| | | | - | company (LLC) | or limited liability partners | ship (LLP) | | |
| | | A partner in a | | | | | | |
| | | | _ | ing executive of | | | | |
| | | An owner of at | t least 5% of th | e voting or equity | securities of a corporatio | n | | |
| | ✓ | No. None of the abo | ove applies. Go | to Part 12. | | | | |
| | | Yes. Check all that | apply above ar | nd fill in the details | s below for each business | i <u>.</u> | | |
| | | | | | Describe the natu | re of the busines | s Employer Identification n | umber Do not |
| | | | | | | | include Social Security nu | umber or ITIN. |
| | | | | | _ | | EIN: | |
| | | Business Name | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | Number Street | | | Name of account | ant or bookkeepe | | |
| | | City | State | Zip Code | _ | | From To | |
| | | Oity | Olaic | Zip Code | | | | |
| | | | | | | | | |
| | | | | | December the met | | | ban Da nat |
| | | | | | Describe the natu | ire of the busines | s Employer Identification n include Social Security nu | |
| | | | | | | | | |
| | | Business Name | | | _ | | EIN: | |
| | | | | | _ | | | |
| | | Number Street | | | Name of account | ant or hookkeens | Dates business existed | |
| | | | | | | and or bookkeepe | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | ire of the busines | s Employer Identification n include Social Security nu | |
| | | | | | _ | | EIN: | |
| | | Business Name | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | Namber Street | | | Name of account | ant or bookkeepe | r | |
| | | City | State | Zip Code | | | From To | |
| | | Oity | Jidie | Zip Cou c | | | | ; |
| | | | | | | | | |
| | | | | | | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 57 of 82

| Deb | tor 1 | Charlene | | Hall | Case number (if known) |
|------|------------|---|---------------------------|-------------------------------------|---|
| | | First Name | Middle Name | Last Name | |
| 28. | | nin 2 years before ye litors, or other parti | | d you give a financial statement | to anyone about your business? Include all financial institutions, |
| | ✓ | No Yes. Fill in the details | below. | | |
| | | | | Date issued | |
| | | Name | | MM/DD/YYYY | |
| | | Number Street | | | |
| | | City | State Zip Code | | |
| Part | 12: | Sign Below | | | |
| | true a | and correct. I unders | stand that making a false | statement, concealing property, | s, and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | x /s/ C | narlene Hall | 3 | ĸ |
| | | | e of Debtor 1 | | Signature of Debtor 2 |
| | | Date 11 | /10/2016 | | Date |
| | Did y | ou attach additiona | pages to Your Statement | t of Financial Affairs for Individu | als Filing for Bankruptcy (Official Form 107)? |
| | ✓ N | No | | | |
| | □ Y | 'es | | | |
| | Did y | ou pay or agree to p | ay someone who is not a | n attorney to help you fill out bar | nkruptcy forms? |
| | ✓ N | l o | | | |
| | | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 58 of 82

B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Charlene Hall | | Case No. | |
|-------|--|--------------------------------------|------------------------------------|---------------------------------|
| - | Debtor | | | (If known) |
| | | | Chapter | Chapter 13 |
| | DISCLOSURE OF C | OMPENSATION | N OF ATTORNEY FO | OR DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and For that compensation paid to me within a services rendered or to be rendered or is as follows: | one year before the filing | of the petition in bankruptcy, or | agreed to be paid to me, for |
| | For legal services, I have agreed to a | accept | | \$4,000.00 |
| | Prior to the filing of this statement I h | nave received | | \$500.00 |
| | Balance Due | | | \$3,500.00 |
| 2. | The source of the compensation paid | to me was: | | |
| | Debtor | Other (specify | y) | |
| 3. | The source of the compensation paid | to me is: | | |
| | ✓ Debtor | Other (specify | ') | |
| 4. | I have not agreed to share the abmembers and associates of my I | pove-disclosed compensa law firm. | ntion with any other person unles | s they are |
| | I have agreed to share the above- members or associates of my law the people sharing in the compen | w firm. A copy of the agre | | |
| 5. | In return for the above-disclosed fee, a. Analysis of the debtor's financi bankruptcy; | _ | - · | |
| | b. Preparation and filing of any p | petition, schedules, stater | nents of affairs and plan which n | nay be required; |
| | c. Representation of the debtor a | at the meeting of creditors | s and confirmation hearing, and a | any adjourned hearings thereof; |
| | d. Representation of the debtor in | n adversary proceedings | and other contested bankruptcy | matters; |
| 6. | By agreement with the debtor(s), the | above-disclosed fee does | s not include the following servic | es: |
| | | | | |
| | | CERTIFICA | ATION | |
| | I certify that the foregoing is a complet he debtor(s) in this bankruptcy proceed | | ement or arrangement for payme | ent to me for representation |
| | 11/10/2016 | | /s/ Chris Pryor | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 60 of 82

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 61 of 82

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case 4nd other expenses of \$371.76

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 63 of 82

- 3. Before signing this agreement, the attorney has received, \$500.00 toward the flat fee, leaving a balance due of \$3,500.00; and \$61.76 for expenses, leaving a balance due of \$3,871.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Debtor(| (s) | Attorney for Debtor(s) | |
|---------|------------|------------------------|--|
| | | /s/ Chris Pryor | |
| /s/ Cha | rlene Hall | | |
| Signed: | | | |
| Date: | 11/10/2016 | | |

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| - | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 68 of 82

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Hall, Charlene Debtor(s) | Case No | Case No | | | |
|--------|---|---------------------------------|---------|--|--|--|
| | 233.0.(4) | Chapter. Chapter13 | | | | |
| | VERIFICA | VERIFICATION OF CREDITOR MATRIX | | | | |
| | The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their know | | | | | |
| Date: | 11/10/2016 | /s/ Hall, Charlene | | | | |
| Jaie | 11/10/2010 | Hall, Charlene | | | | |
| | | Signature of Debtor | | | | |

ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT , MI 48243

CAPITAL ONE BANK USA NA PO BOX 85520 RICHMOND , VA 23285

Great American Finance 20 N Wacker Dr, Ste 2275 Chicago , IL 60606

CREDIT ONE BANK NA PO BOX 98875 LAS VEGAS, NV 89193

CREDITONEBNK PO BOX 98872 LAS VEGAS , NV 89193

WEBBNK/FHUT Po Box 166 Newark , NJ 07101

FIRST PREMIER BANK PO Box 7999 c/o Stephen Dirksen Saint Cloud , MN 56302

FST PREMIER 3820 N LOUISE AVE SIOUX FALLS, SD 57107

cb/carson PO BOX 15521 Wilmington , DE 19805

Stellar Rec 1327 Highway 2 Wes Kalispell , MT 59901

CB/LIMITED 555 W. 112TH AVE. NORTHGLENN , CO 80234 SYNCB/WALMAR PO BOX 965024 EL PASO , TX 79998

CB/PIER1 100 Pier 1 Pl Fort Worth , TX 76102

COMENITY BANK/ASHSTWRT PO BOX Columbus , OH 43218

CB/ASTEWRT 220 W SCHROCK RD COLUMBUS , OH 43081

COMENITY BANK/VCTRSSEC Po Box 182273 Columbus , OH 43218

COMENITYCAPITAL/GMSTOP PO BOX 182120 COLUMBUS , OH 43218

SYNCB/LOWES PO BOX 103065 ROSWELL, GA 30076

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO, IL 60622

CCB/GAMESTOP PO Box 182120 Columbus , OH 43218

COMENITY BANK/NWYRK&CO 220 W SCHROCK RD WESTERVILLE , OH 43081

SYNCB/JCP PO BOX 965007 ORLANDO , FL 32896 MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606

NISSAN MOTOR ACCEPTANC ATT: Aimee Cobb PO Box 660366 Dallas , TX 75266

Indiana Department of Revenue PO Box 1685 Indianapolis , IN 46206

City of Chicago - Dep't of Revenue PO Box 88292 Chicago , IL 60608

PLS - Bankruptcy 800 Jorie Blvd 2nd Floor Oak Brook , IL 60523

Blue Trust Loans PO Box 1754 Hayward, WI 54843

Silver Cloud Financial 635 East Hwy 20C Upper Lake , CA 95485

AAA Community Finance Po Box 190 Bethalto , IL 62010

American Web Loan 522 N 14th St, Ponca City , OK 74601

Green Trust Cash LLC 153 Maiden Lane 3rd Floore San Francisco , CA 94108

North Plain PO Box 516 Hays, MT 59527 Big Picture Loans P.O. Box 704 Watersmeet , MI 49969

ZocaLoans c/o: Rosebud Lending LZO PO Box 1147 27565 Research Park Dr Mission , SD 57555

Bank of America Po Box 26078 Greensboro , NC 27420

Chase Bank 340 S. Cleveland Bldg 370 OH1-1073 Westerville , OH 43081

ASHRO 1112 7th Avenue Monroe , WI 53566

Montgomery Ward 3650 Milwaukee Street Madison , WI 53714 Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 73 of 82

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 74 of 82

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 75 of 82

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to \$1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor.* If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 77 of 82

- 3. Before signing this agreement, the attorney has received, \$500.00 toward the flat fee, leaving a balance due of \$3,500.00; and \$61.76 for expenses, leaving a balance due of \$3,871.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 11/5/2016

/s/ Charlene Hall

Debtor(s)

Signed:

/s/ Chris Prydi

Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 78 of 82

| Debtor 1 Charlene First Name | · · · · · · · · · · · · · · · · · · · | Hall Last Name | Case number (if known) | | |
|--|--|--|---------------------------------|--|--|
| | | | | | |
| Part 6: Answer These Qu | estions for Reporting Purposes 16a. Are your debts primarily | consumer debts? Co | | | |
| you have? | "incurred by an individual | I primarily for a person | al, family, or household | purpose." | |
| | No. Go to line 16b. | | | | |
| | Yes. Go to line 17. | hueinaee dahte? Ruc | ingee dahte ara dahte ti | ast you incurred to obtain | |
| A- 1000 T T T T T T T T T T T T T T T T T | 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | |
| THE PROPERTY OF THE PROPERTY O | No. Go to line 16c. | | | | |
| | Yes. Go to line 17. | | | | |
| | 16c. State the type of debts yo | ou owe that are not cor | nsumer debts or busine | ss debts. | |
| 17. Are you filing under Chapter 7? | No. I am not filing under Cha | pter 7. Go to line 18. | | | |
| Do you estimate that | | | | y is excluded and administrative | |
| after any exempt property is excluded | expenses are paid that the | unds will be available to | distribute to unsecured ci | reditors? | |
| and administrative | No. | | | | |
| expenses are paid that funds will be available | Yes. | | | | |
| for distribution to | | | | | |
| unsecured creditors? | | | | | |
| 18. How many creditors | ☑ 1-49 | 1,000-5,000 |) [| 25,001-50,000 | |
| do you estimate that | 50-99 | 5,001-10,00 | No. | 50,001-100,000 | |
| you owe? | 100-199 | 10,001-25,0 | 000 | More than 100,000 | |
| | 200-999 | va a marketim era erana era eran eran eran eran eran | | ant exception supports an activities and the control of the contro | |
| 19. How much do you | \$0-\$50,000 \$50,001-\$100,000 | \$1,000,001 | -\$10 million 1-\$50 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion | |
| estimate your assets to be worth? | \$100,001-\$500,000 | Section 2 | 1-\$100 million | \$10,000,000,001-\$10 billion | |
| | \$500,001-\$1 million | lineal . | 01-\$500 million | More than \$50 billion | |
| ²⁰ · How much do you | ☐ \$0-\$50,000 | \$1,000,001- | -\$10 million | 7 \$500,000,001-\$1 billion | |
| estimate your | \$50,001-\$100,000 | \$10,000,00 | 1-\$50 million | \$1,000,000,001-\$10 billion | |
| liabilities to be? | \$100,001-\$500,000 | Inmark . | 1-\$100 million | 310,000,000,001-\$50 billion | |
| | \$500,001-\$1 million | \$100,000,00 | 01-\$500 million | More than \$50 billion | |
| Part 7: Sign Below | | | | | |
| For you | I have examined this petition, ar correct. | nd I declare under pena | alty of perjury that the in | nformation provided is true and | |
| | | nanter 7. Lam aware th: | et I may proceed if eligi | ble under Chapter 7, 11,12, or 13. | |
| | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed | | | | |
| To you wanted | under Chapter 7. | | | | |
| | If no attorney represents me and | | | | |
| out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | |
| | Lunderstand making a false stat | • | · | · · | |
|)) } | connection with a bankruptcy ca | ase can result in fines | | | |
| | both. 18 U.S.C. §§ 152, √341, 1519, and 3571. | | | | |
| ************************************** | /s/ Charlene Hall | will Abl | × | | |
| | Signature of Debtor 1 Signature of Debtor 2 | | | | |
| | Executed on11/5/2016 | | Executed on | | |
| Persistan N. 1980. A protein N. Freizen Kompressivon nichter 2005 m.C. Ber 100 com Freizen annet Access of tra-design | MM / DD | | | MM / DD / YYYY | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 79 of 82

| Fill in this infor | mation to identify your c | ase: | | |
|---------------------------|---------------------------|-------------|----------------------|-------------|
| Debtor 1 | Charlene | | Hall | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| Case number (If known) | | | (State) | ···· |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Part 1 | : Sign Below | | | | |
|-----------------------------|---|---|--|--|--|
| Di | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | |
| | No | | | | |
| V AMERIKANSKA (11 V VVV) | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | |
| ANNANAMINA AL ANTINA ANTINA | | | | | |
| andre of the second | | | | | |
| | nder penalty of periury, I declare that I have read the summary a nat they are true and correct. / | and schedules filed with this declaration and | | | |
| | s/ Charlene Hall | * | | | |
| Sig | gnature of Debtor 1 | Signature of Debtor 2 | | | |
| Da Da | ate 11/5/2016 MM/DD/YYYY | Date | | | |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 80 of 82

| Debtor 1 | Charlene | | Hall | Case number (if known) |
|--------------------------------------|-------------------------------|----------------|---------------------------|--|
| . Name and the state of the state of | First Name | Middle Name | Last Name | A COMMINSOR WAS IN COMMINSOR OF THE COMM |
| | editors, or other parti | | ou give a financial state | ment to anyone about your business? Include all financial institutions, |
| 본 | No Yes. Fill in the detail | s below. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | _ |
| | 1144115 | | | |
| | Number Street | | | |
| | City | State Zip Code | | |
| Part 12: | Sign Below | • | | |
| | nkruptcy case can re | | | perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | _ | | * | Date |
| Did y | No Yes | | | viduals Filing for Bankruptcy (Official Form 107)? t bankruptcy forms? |
| 百 | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 81 of 82

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| in re: | Debtor(s) | Case No | |
|-----------------|-----------|--|-------------------------------------|
| | | Chapter. | Chapter13 |
| | VERIFI | CATION OF CREDITOR MAT | RIX |
| Th knowledge | | ify that the attached list of creditors is tru | ue and correct to the best of their |
| Date: | 11/5/2016 | /s/ Hall, Charlene | Charle Hall |
| | | Hall, Charlene Signature of Deb | otor |

Case 16-35837 Doc 1 Filed 11/10/16 Entered 11/10/16 09:24:35 Desc Main Document Page 82 of 82

| Debte | or 1 | Charlene First Name | Middle Name | Hall Last Name | Case number (if known) | |
|--------|------|---|-----------------------------|--|---|---|
| 16 | | Iculate the median family inco | | American services and a service of the services of | | and the territory and the state of the state of |
| 10. | | a. Fill in the state in which you li | | Illinois | μο. | |
| | | | | 1 | - | |
| | | b. Fill in the number of people in | | 1 | - | \$50,133.00 |
| | 160 | Fill in the median family incom household using the link specified in the | • | To fi | nd a list of applicable median income amounts, go online may also be available at the bankruptcy clerk's office. | <u> </u> |
| 17. | Но | w do the lines compare? | | | | |
| | 17a | | | | is form, check box 1, <i>Disposable income is not determined tion of Disposable Income</i> (Official Form 122C-2). | |
| | 17t | | to Part 3 and fill out 0 | Calculation of Dispo | neck box 2, Disposable income is determined under 11 osable Income (Official Form 122C-2). On line 39 of that | |
| Part | 3; | Calculate Your Commitm | ent Period Under 1 | 11 U.S.C. §1325(| b)(4) | |
| 18. | Co | py your total average monthly | income from line 11. | | | \$2,732.12 |
| 19. | | | | | e is not filing with you, and you contend that calculating the fyour spouse's income, copy the amount from line 13. | |
| | 19a | a. If the marital adjustment does | not apply, fill in 0 on lir | ne 19a. | | -\$0.00 |
| | 19t | o. Subtract line 19a from line | 18. | | | \$2,732.12 |
| 20. | Cal | Iculate your current monthly i | ncome for the year. F | follow these steps: | | |
| | 20a | a. Copy line 19b. | | | | \$2,732.12 |
| | | Multiply by 12 (the number of | months in a year). | | | x 12 |
| | 20t | o. The result is your current mon | thly income for the yea | r for this part of the t | form. | \$32,785.44 |
| | 200 | c. Copy the median family incom | ne for your state and siz | e of household from | n line 16c. | \$50,133.00 |
| 21. | Нον | w do the lines compare? | | | | |
| | V | Line 20b is less than line 20c. commitment period is 3 years. | | ed by the court, on t | he top of page 1 of this form, check box 3, The | |
| | | Line 20b is more than or equal 4, <i>The commitment period is 5</i> | | erwise ordered by th | e court, on the top of page 1 of this form, check box | |
| Part • | 4: | Sign Below | | | | |
| | | By signing here, I declare under the signature of Debtor 1 | penalty of perjury that | A CONTRACTOR OF THE PROPERTY O | this statement and in any attachments is true and correct. Signature of Debtor 2 | |
| | | orginature of Debtof 1 | | | ognical of Jobiol 2 | |
| | | Date 11/5/2016 MM/DD/YYYY | | | Date MM/DD/YYYY | |
| | | If you checked 17a, do NOT fill If you checked 17b, fill out For above. | | | 39 of that form, copy your current monthly income from line | 14 |